NONCOMPLIANCE 24-HOUR NOTIFICATION REPORT

State Form 52415 (R / 10-13)
Indiana Department of Environmental Management
Office of Water Quality

INSTRUCTIONS: Complete all sections of this form and email it to Office of Water Quality, Compliance Data Section at wwreports@idem.IN.gov. Thorough completion of this report will satisfy the Office of Water Quality (OWQ) telephone and 5-day written noncompliance notification reporting requirements of your NPDES permit. To speak with someone in OWQ, call (317) 232-8670.

Additionally, any noncompliance which may pose a significant danger to human health or the environment (including a fish kill) must be immediately reported to the Emergency Response Section spill response line at: (317) 233-7745 or toll free within Indiana at (888) 233-7745.

FACILITY INFORMATION

Facility Name	County	NPDES Permit Number
ArcelorMittal Indiana Harbor LLC	Lake	0000205
Individual Reporting	**Telephone Number**	**Reporting Date *(month, day, year)***
Kevin Lurtz	219.399.3189	08/08/17

Email Address
Kevin.Lurtz@arcelormittal.com

NONCOMPLIANCE INFORMATION

Date *(month, day, year)*	Outfall	Parameter	Permit Limit *(Units/Daily/Weekly/Ave/Max/Min)*	Monitored Value
08/08/17	010	narrative	N/A	N/A
Date *(month, day, year)*	Outfall	Parameter	Permit Limit *(Units/Daily/Weekly/Ave/Max/Min)*	Monitored Value

Description of the Noncompliance and its Cause:

Outfall #010 is the non-contact discharge from the Boilerhouse / Powerhouse, and Blast Furnaces. A small amount of white foam is being discharged from the outfall as noticed at 6:30am. A crew is on site removing the foam. The specific root cause of the incident is still under investigation.

Description of the Period of Noncompliance, Including Exact Dates and Time, and if the Noncompliance has not been Corrected, the Anticipated Time it is Expected to Continue:

Still under investigation.

Steps Taken or Planned to Reduce, Eliminate, and Prevent Reoccurrence of the Noncompliance:

Still under investigation.

CERTIFICATION AND SIGNATURE

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE: _____ DATE *(month, day, year)*: 8-8-17