

**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that I served the documents listed herein by mailing, via certified mail, return receipt requested No. 7017 0660 0001 1844 7679, on DEC 04 2018, a copy of those documents to the person named herein at \_\_\_\_\_, the address indicated.

DOCUMENTS:

1. Notice of Violation;
2. Order;
3. Exhibit A;
4. Exhibit B;
5. Exhibit C;
6. Exhibit D;
7. Certification.

PERSONS SERVED AND ADDRESS:

Mr. Steve Whitesides  
Big Island Dairy LLC  
695 N 700 E  
Rupert, Idaho 83350

DATED: Pearl City, Hawaii, DEC 04 2018



ALEC WONG, P.E., CHIEF  
Clean Water Branch

SC:na

**CERTIFICATION**

I hereby certify that the attached copy is an accurate and correct copy of the following documents in the Department of Health Docket No. 2018-CW-EO-27

1. Notice of Violation;
2. Order;
3. Exhibit A;
4. Exhibit B;
5. Exhibit C;
6. Exhibit D;
7. Certification.

and that with respect to the above described documents, I am authorized to make this certification.

DATED: Pearl City, Hawaii, DEC 04 2018

ATTEST:

  
\_\_\_\_\_  
ALEC WONG, P.E., CHIEF  
Clean Water Branch

SC:na