Print or Type

In the Matter of the Application by SCS Carbon )

2025. File this completed form electronically at

puc.sd.gov/EFilingOptions.aspx

## BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF SOUTH DAKOTA

Print Form

**APPLICATION FOR PARTY STATUS** 

This form is only for persons who wish to be an active party in this docket. You do NOT need to be a party to submit comments.

Transport LLC for a Permit to Construct a Carbon ) Dioxide Transmission Pipeline )	HP24-001
Name of Applicant. This will be the person or entity named as a party.)	Public Utilities Commission to be granted party status in this proceeding.
Place a check mark next to <u>each</u> item below that applies to you, adding a mileage number where requested.	This section is to be completed by the person requesting party status. All fields are required.
I am a person or organization that received official notification of the project via U.S. mail from the siting permit	Applicant's Printed/Typed Name
applicant. $\underline{X}$ I reside within $\underline{\frac{1}{2}}$ miles of the proposed project.	Aluin HAMN 12-27-2024 Signature of Applicant Date Signed
Residential address if different from your mailing address:	
	Name of Applicant's Organization (if Applicable)
I own land within/2_miles of the proposed project.	46127 279 <sup>th</sup> 5t Applicant's Address (PO Box/St/Ave/Road)
Legal description: <u>199 N R52 W</u>	Chancelluz S & 5'7015 Applicant's Address (City, State, ZIP Code)
Section 23 Turner Count	Y (605) 359-5129
I officially represent a municipal, city, township,	Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number
county or other affected governmental agency within	gluinhagn & hot mail. com
miles of the proposed project.	Applicant's E-mail Address* or, if represented, Applicant's Attorney's E-mail Address*
Explain your interest in applying for party status below.	The section below is to be completed by the Applicant's attorney, if represented. All fields are required.
Safety + Health concerns	
destruction of LAND and	Attorney's Printed/Typed Name
their practices and maintance	Signature of Attorney Date Signed
don't need any more inconveniences	
don't need any more inconveniences want them to respect our rights	Attorney's Address (PO Box/St/Ave/Road)
as land owners	
	Attorney's Address (City, State, ZIP Code)
Deadline: This application must be filed with the Public	*The Commission processes its dockets electronically for time and cost efficiencies. Communication on the docket
Utilities Commission on or before 5:00 p.m. CT, Jan. 24,	will be done via email to parties to this docket. Failure to

to the party, pursuant to SDCL 49-41B-17.1.

If your submitted form is incomplete, you risk not being granted party status.

DEC 30 2024

served upon the county auditor rather than sent directly