Print or Type

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF SOUTH DAKOTA

Print Form

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.

In the Matter of the Application by SCS Carbon Transport LLC for a Permit to Construct a Carbon Dioxide Transmission Pipeline)	
Catherine A. Hoss (Name of Applicant. This will be the person or entity named as a party.), petitions t	he	
Place a check mark next to <u>each</u> item below that applies to you, adding a mileage number where requested. X I am a person or organization that received official notification of the project via U.S. mail from the siting permit applicant.		
Residential address if different from your mailing address:		
X I own land within 1/2 miles of the proposed project.		
Legal description: Lake County		
Sec/Twp/Rng Summit Township, Lot 1 Hammers Addition #1478C 25-108-51		
I officially represent a municipal, city, township,		
county or other affected governmental agency within		
miles of the proposed project.		
Explain your interest in applying for party status below.		
See attached file.		
Deadline: This confication must be filed with the Dublic		

Deadline: This application must be filed with the Public Utilities Commission on or before 5:00 p.m. CT, Jan. 24, 2025. File this completed form electronically at puc.sd.gov/EFilingOptions.aspx

APPLICATION FOR PARTY STATUS

HP24-001

Public Utilities Commission to be granted party status in this proceeding		
This section is to be completed by the person requesting party status. All fields are required.		
Catherine A. Hoss		
Applicant's Printed/Typed Name		
/s/	12/31/2024	
Signature of Applicant	Date Signed	
NA		
Name of Applicant's Organization (if Applicable)		
Can be contacted via counsel		
Applicant's Address (PO Box/St/Ave/Road)		
Can be contacted via counsel		
Applicant's Address (City, State, ZIP Code)		
402-493-4100		
Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number		
SDco2@dominalaw.com		
Applicant's E-mail Address* or, if represented, Applicant's	Attorney's E-mail Address*	
The section below is to be completed by the Applicant's attorney, if represented. All fields are required.		
Brian Jorde / Ryan Cwach		
Attorney's Printed/Typed Name		
Brian E. Jorde	12/10/24	
Signature of Attorney	Date Signed	
2425 S. 144th St.		
Attorney's Address (PO Box/St/Ave/Road)		
Omaha, NE 68144		
Attorney's Address (City, State, ZIP Code)		

*The Commission processes its dockets electronically for time and cost efficiencies. Communication on the docket will be done via email to parties to this docket. Failure to provide an email address may result in documents being served upon the county auditor rather than sent directly to the party, pursuant to SDCL 49-41B-17.1.