Print or Type

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

PRINT

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.

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 )	APPLICATION FOR PARTY STATUS
Transport LLC for a Permit to Construct a Carbon ) Dioxide Transmission Pipeline )	HP24-001 RECEIVED
(Name of Applicant. This will be the person or entity named as a party.), petitions the	Public Utilities Commission to be granted party status in his procee
Place a check mark next to <u>each</u> item below that applies to you, adding a mileage number where requested.	SOUTH DAKOTA PUB This section is to be completed by interperson repursion 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.	Applicant's Printed/Typed Name
I reside within	Signature of Applicant Date Signed
Residential address if different from your mailing address:	
429 S. Elmst. Lennox SD 57039	Name of Applicant's Organization (if Applicable)
I own land within 7 miles of the proposed project.	429 S. Elm St — POBOX 62 Applicant's Address (PO Box/St/Ave/Road)
Legal description: NW 14 - 5,99-51	Applicant's Address (City, State, ZIP Code)
	605-647-5985
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	CCWUIF 48460 9 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.
	Attorney's Printed/Typed Name
	Signature of Attorney Date Signed
	Attorney's Address (PO Box/St/Ave/Road)
	Attorney's Address (City, State, ZIP Code)
Deadline: This application must be filed with the Public	*The Commission processes its dockets electronically fo time and cost efficiencies. Communication on the docke

Utilities Commission on or before 5:00 p.m. CT, Jan. 24,

2025. File this completed form electronically at

puc.sd.gov/EFilingOptions.aspx