

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)

APPLICATION FOR PARTY STATUS

HP24-001

City of Hartford

_____, petitions the Public Utilities Commission to be granted party status in this proceeding.
(Name of Applicant. This will be the person or entity named as a party.)

Place a check mark next to each item below that applies to you, adding a mileage number where requested.

____ I am a person or organization that received official notification of the project via U.S. mail from the siting permit applicant.

____ I reside within ____ miles of the proposed project.

Residential address if different from your mailing address:

____ I own land within ____ miles of the proposed project.

Legal description: _____

I officially represent a municipal, city, township, county or other affected governmental agency within 1 miles of the proposed project.

Explain your interest in applying for party status below.

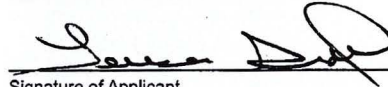
The SCS pipeline will run just to the west of Hartford city limits. Due to this close proximity, the city has concerns with hampering/stopping our growth to the west. Hartford has a high growth rate per capita and we do not want to stifle this growth. Another big concern is for the safety of our citizens - any leak or rupture may cause health risks. I ask that the city attorney, Tom Frieberg, with Frieberg, Nelson and Ask be included on all correspondence.

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

This section is to be completed by the person requesting party status. All fields are required.

Teresa Sidel

Applicant's Printed/Typed Name



12/4/2024

Signature of Applicant

Date Signed

City of Hartford

Name of Applicant's Organization (if Applicable)

125 N Main Ave

Applicant's Address (PO Box/St/Ave/Road)

Hartford, SD 57033

Applicant's Address (City, State, ZIP Code)

605-528-6187

Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number

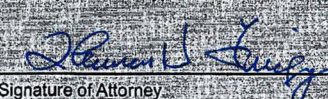
cityhall@hartfordsd.us

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.

Tom Frieberg

Attorney's Printed/Typed Name



12/4/2024

Signature of Attorney

Date Signed

PO Box 511

Attorney's Address (PO Box/St/Ave/Road)

Beresford, SD 57004

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.

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