

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 Mellette, South Dakota

\_\_\_\_\_ 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 2 miles of the proposed project.

Explain your interest in applying for party status below.

I am the mayor of Mellette. The proposed carbon pipeline is to be near the city limits of Mellette in Spink County. Several citizens have safety concerns.

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](http://puc.sd.gov/EFilingOptions.aspx)

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

Mayor Brian Bauer

Applicant's Printed/Typed Name

 1/23/2025  
Signature of Applicant Date Signed

City of Mellette, South Dakota

Name of Applicant's Organization (if Applicable)

PO Box 105

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

Mellette, SD 57461

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

605-290-5631 / 605-225-1000

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

blbauer619@gmail.com / vfischbach@nvc.net

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.

Victor B. Fischbach

Attorney's Printed/Typed Name

 1/23/2025  
Signature of Attorney Date Signed

PO Box 1456

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

Aberdeen, SD 57401

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.