Print or Type

applicant.

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)	APPLICATION FOR PARTY STATUS
Transport LLC for a Permit to Construct a Carbon) Dioxide Transmission Pipeline)	HP24-001 RECEN
Desek De Ross , petitions the	Public Utilities Commission to be granted party. And is in thi
(Name of Applicant. The will be the person or entity named as a party.)	
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 party status. All fields are required.
The second secon	\

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

 χ I reside within $\frac{1}{2}$ miles of the proposed project.

Residential address if different from your mailing address:

 χ I own land within $\frac{1}{2}$ miles of the proposed project.

Legal description: 28 //26/0 / 6800

I officially represent a municipal, city, township,

county or other affected governmental agency within _____

Explain your interest in applying for party status below.

The PUC make the Correct Lecision

last time, in 2023. R221 was soundly

defauted by the voters. The route is too close to our house. We have five

Children. I rent and form this land

Our Comily hunts this lova

HP24-001 ommission to be granted party **Ani**s in this 025ceeding.

This section is to be completed by the restrict party status. All fields are required.
Doek Delanz
Applicant's Printed/Typed Name
1.13.25
Signature of Applicant Date Signed
Name of Applicant's Organization (if Applicable)
Applicant's Address (PO Box/St/Ave/Road) 57456
Applicant's Address (City, State, ZIP Code)
Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number
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.
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)
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.

Utilities Commission on or before 5:00 p.m. CT, Jan. 24, 2025. File this completed form electronically at

Deadline: This application must be filed with the Public

puc.sd.gov/EFilingOptions.aspx

miles of the proposed project.