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

Debora J Ross

, 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 T miles of the proposed project. Х

Residential address if different from your mailing address:

X

\_ ] own land within\_\_\_\_\_miles of the proposed project.

LT 14 AUDITORS SD SE 27-123-64 (.69 A) Legal description: \_\_\_\_

# (property our home is located)

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.

I do NOT want this dangerous Pipeline near any residential areas, or animal refuge facility. the new route from the southis less than a mile from our home & the northern route is less than 2 miles from our home on the west side of Aberdeen. there are many others, as well as the Humane Society & an Aspire congregate home that are much closer yet! Also there is no purpose for carbon capturing. our plants, trees& crops need the CO2 & we all need the oxygen the plants and

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.

## Debora J Ross

Applicant's Printed/Typed Name

Signature of Applicant

Dobra (10

12/10/2024

Date Signed

Name of Applicant's Organization (if Applicable)

# 2208 135th St SW

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

# Aberdeen, SD 57401

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

## 605 380 7168

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

### dross@nrctv.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.

•	
	Date Signed

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.