

BEFORE THE PUBLIC UTILITIES COMMISSION OF THE STATE OF SOUTH DAKOTA

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

Red Rock Township

_____, 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 25 miles of the proposed project.

Explain your interest in applying for party status below.

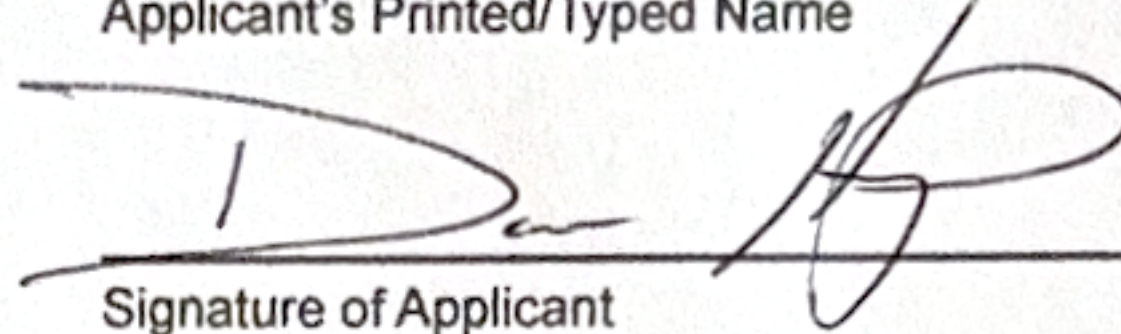
We collectively voted in favor of safeguarding the fundamental rights and liberties of the citizens within our township, insuring that their interests are upheld and their voices are heard in matters that impact the communities well-being and future. This decision ensures public access, safety, and the efficient use of our roads our maintained, while also protecting the interests of landowners and citizens of the Red Rock Township community.

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.**

Dan Hup Clerk

Applicant's Printed/Typed Name



Signature of Applicant

1-10-25

Date Signed

Red Rock Township

Name of Applicant's Organization (if Applicable)

26196 485th Ave

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

Valley Springs, SD 57068

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

+1 (605) 377-8058

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

Danielhup@hotmail.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.

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.

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