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

Lynda Burggraff, 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:

_____

X I own land within 15 miles of the proposed project.

Legal description: Moody County

Sec/Twp/Rng 32-106-48, 12-105-49

_____ 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 am a concerned South Dakota citizen who knows People who live and attend school near the proposed Pipeline. I believe they have the right to decide if a pipeline Should be built in the vicinity where they live, work, or Go to school

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.**

Lynda Burggraff
Applicant's Printed/Typed Name

Lynda Burggraff
Signature of Applicant — Date Signed

Name of Applicant's Organization (if Applicable)

Can be contacted via counsel
Applicant's Address (PO Box/St/Ave/Road)

Can be contacted via counsel
Applicant's Address (City, State, ZIP Code)

402-493-4100
Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number

SDco2@dominalaw.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.

Brian Jorde / Ryan Cwach
Attorney's Printed/Typed Name

Brian E. Jorde — 12/10/24
Signature of Attorney — Date Signed

2425 S. 144th St.
Attorney's Address (PO Box/St/Ave/Road)

Omaha, NE 68144
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.