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 )	APPLICATION FOR PARTY PLEEVED
Dioxide Transmission Pipeline )	HP24-001 JAN 1 3 2025
Makak DeKad (Name of Applicant. This will be the person or entity named as a party.), petitions the	Public Utilities Commission to be grante <b>SOUTH</b> TEAMONTA PUBLICATION OF THE PUBLIC PU
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 requesting party status. All fields are required.
I am a person or organization that received official notification of the project via U.S. mail from the siting permit applicant.	Makala DeRaad Applicant's Printed/Typed Name
I reside within miles of the proposed project.	Makala De Raad 1-13, 25 Signature of Applicant Date Signed
Residential address if different from your mailing address:	11641 438 Ave. Leala SD 5746
11641 438 Ave Lewla SD 57450	Name of Applicant's Occapization (if Applicable)
I own land withinmiles of the proposed project.	Applicant's Address (PO Box/St/Ave/Road)
Legal description: McPherson	
28/126N/GBW	Applicant's Address (City, State, ZIP Code)
	605. 216-6736
I officially represent a municipal, city, township,	Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number
county or other affected governmental agency within	
miles of the proposed project.	Applicant's E-mail Address* or, if represented, Applicant's Attorney's E-mail Address*
Explain your interest in applying for party status below.	The section below is to be completed by the Applicant's attorney, if represented. All fields are required.
I live close to the Arew route.	
We hant it	Attorney's Printed/Typed Name
We hant in this area. My dad farm his band.	
My and tarm his land.	Signature of Attorney Date Signed
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	Attorney's Address (PO Box/St/Ave/Road)
	Attorney's Address (City, State, ZIP Code)
	*The Commission processes its dockets electronically for
Deadline: This application must be filed with the Public	time and cost efficiencies. Communication on the docket will be done via email to parties to this docket. Failure to
Utilities Commission on or before 5:00 p.m. CT, Jan. 24,	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.

2025. File this completed form electronically at

puc.sd.gov/EFilingOptions.aspx