

# 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

Robert DeBoer  
(Name of Applicant. This will be the person or entity named as a party.)

, petitions the Public Utilities Commission to be granted party status in this proceeding.

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 0.5 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  miles of the proposed project.

Explain your interest in applying for party status below.

I am opposed to the proposed project. The risks outweigh the benefits. The Applicant will be moving CO<sub>2</sub> (a valuable gas) in a dangerously pressurized pipeline. The CO<sub>2</sub> has value here in South Dakota and can be collected in alternative ways with far less risk to people and the environment.

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](http://puc.sd.gov/EFilingOptions.aspx)

This section is to be completed by the person requesting party status. **All fields are required.**

Robert DeBoer

Applicant's Printed/Typed Name

Robert DeBoer 1-17-25

Signature of Applicant

Date Signed

Name of Applicant's Organization (if Applicable)

337 West Park Ave

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

Huron, S.D. 57350

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

605-350-4507

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

bob.deboer26@gmail.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

**RECEIVED**

JAN 21 2025

SOUTH DAKOTA PUBLIC  
UTILITIES COMMISSION

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