

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

Sandra Combs, 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 0.5 miles of the proposed project.

Legal description: SW 8-110-56 De Smet
Township, Kingsbury Cty.
S. Dakota

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 co-own this property with Jeanne Combs and Rod Combs SW 8-110-56 De Smet Township, Kingsbury County, SD. This land is sited for the branch pipeline SDT-411. None of us has received any notification other than a certified letter with notice of public meetings the PUC is putting up in January

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.**

Sandra Combs
Applicant's Printed/Typed Name

Sandra Combs 1-14-25
Signature of Applicant Date Signed

Name of Applicant's Organization (if Applicable)

43395 Rose Lane
Applicant's Address (PO Box/ST/Ave/Road)

De Smet SD 57231
Applicant's Address (City, State, ZIP Code)

PO Box 114
Wickenburg AZ 85358
Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number

928.925.9557
sandyoutwest@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.

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