## 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.

Signa

In the Matter of the Application by SCS Carbon ) Transport LLC for a Permit to Construct a Carbon ) Dioxide Transmission Pipeline ) Sanborn County Commission

## **APPLICATION FOR PARTY STATUS**

HP24-001

(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 <u>each</u> item below that applies to you, adding a mileage number where requested.

XXX 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:

Print or Type

XXX

\_\_\_\_\_ I officially represent a municipal, city, township,

county or other affected governmental agency within  $\underline{\checkmark}$ 

miles of the proposed project.

Explain your interest in applying for party status below.

The Sanborn County Commission and the elected and appointed officials of Sanborn Couty have a direct interest in all aspects of the proposed permit currently pending before the Public Utilities Commission. It is important that the Commission receive timely information and the ability to fully participate in the process and procedures.

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. Jeff Ebersdorfer, Chairman

Applicant's Printed/Typed Name Ula

Sanborn County Commission

Name of Applicant's Organization (if Applicable) 604 W 6th St. / P.O. Box 7

Applicant's Address (PO Box/St/Ave/Road) Woonsocket, SD 57385

Applicant's Address (City, State, ZIP Code) (605) 554-1661

Applicant's Phone Number or, if represented, Applicant's Attorney's Phone Number aaronpilcherlaw@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. Aaron P. Pilcher

Attorney's Brinted/Typed Nerve	12/27/24
Signature of Attorney 79 3rd St. SE	Date Signed

Attorney's Address (PO Box/St/Ave/Road) Huron, SD 57350

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.