

**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

Trevor Zeck

_____, 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 .25 miles of the proposed project.

Residential address if different from your mailing address:

I own land within .25 miles of the proposed project.

Legal description: _____

T123 N R 62W SW25

____ 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.

This pipeline is much too close to my homestead. I am fully against it but extremely against in being this close to my home. There are many routes to get around my farm without being near anyone's home. Especially less than .25 miles.

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.**

Trevor Zeck

Applicant's Printed/Typed Name



12/26/24

Signature of Applicant

Date Signed

Name of Applicant's Organization (if Applicable)

13451 400th Ave

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

Groton, SD 57445

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

605-216-8910

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

zeck_trevor@hotmail.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-1

RECEIVED

DEC 30 2024

**SOUTH DAKOTA PUBLIC
UTILITIES COMMISSION**

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