

# State of Vermont Public Utility Commission

## Motion to Intervene Form

Intervenor and Case Information	
<b>Case Number</b>	21-2939-NMP
<b>Name</b>	Joan Allen and Michael Binder
<b>Mailing Address</b>	Street and # 1953 Davis Rd. Randolph Center Town State and Zip Vermont 05061
<b>Daytime Phone</b>	802-728-4830
<b>E-mail Address</b>	joanbarballen@gmail.com michaeljbinder@yahoo.com
<b>Name of Legal Counsel (if any)</b>	
<b>Mailing Address of Legal Counsel (if any)</b>	Street and # Town State and Zip
<b>E-mail Address of Legal Counsel (if any)</b>	
The Rule 2.209 Criteria	
<p><b><u>Intervention as of Right</u></b>                      (this is uncommon, leave blank if not applicable to your situation)</p> <p><b>Please identify any statute, legal rule, or Commission order that you think gives you a legal right to be a party in the case. If this right is conditional, please describe how you satisfy these conditions.</b></p>	
<p><b><u>Permissive Intervention</u></b></p> <p><b>Please describe all the interests you have that you think will be adversely affected by the outcome of the case. Please be as specific as possible. Attach additional sheets if necessary.</b></p>	Orderly Development, Town Plan Wildlife habitat and wildlife use of the property Vernal pool Water and Chemicals Possible blasting Possible fencing Possible herbicide use

**Please state whether there are other ways to protect your interest(s) besides as a party participating in this proceeding. If there is no other way for you to protect your interests, please state this fact. Please also explain whether there is already a party in the case who has the same or similar interest(s) to be protected in the case.**

There are no other ways to protect our interests besides as a party participating in this proceeding. There are no other parties in the case who have the same or similar interests to be protected in the case.

**Certification** This section may be completed by the intervenor or a duly authorized representative.

**I certify that the information provided on this form is true and accurate to the best of my knowledge.**

Print Name Joan Allen and Michael Binder

Signature \_\_\_\_\_

Date 10/25/2021

*Note: A signature is not required if this form is filed using ePUC, the Commission's online document management system, which is accessible at <https://epuc.vermont.gov>*