



Dear Landowner,

EQT Production Company (EQT) is pleased to offer direct deposit for payments related to your natural gas and/or oil interest. If you elect to have your payments deposited directly into your account, you must complete and return the enclosed authorization form.

On the first line of the form, please insert your account name and EQT owner number. In the following spaces, provide your bank (depository) name, your bank's address, as well as your routing number and account number, both of which can be found on the face of your bank check.

In the bottom section of the form, print your name and last 4 digits of your Tax ID number (Social Security Number). Please include *phone number* and *email address* where you can be reached. Then sign and date the form. Also, as shown on the form, please staple a voided check to the authorization agreement. Send your completed form along with the attached voided check to:

EQT Production Company
Attn: Owner Relations
400 Woodcliff Dr
Canonsburg, PA 15317

Once the completed form and copy of your voided check or letter from your Bank on their Letterhead verifying the account are received, it will be processed by EQT's accounting department. After it has been processed, it should take one to two months before the direct deposit is set up for your account.

If you have any questions regarding this matter, please call **1-844-EQT-Land** or submit an email to ownerrelations@eqt.com and we will respond as soon as possible.

Sincerely,

EQT Owner Relations

Enclosure: Direct Deposit Form

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDITS)

Name: _____ EQT Owner #: _____

I (we) hereby authorize EQT Production Company, hereinafter called COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) Checking Account indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Depository Name: _____

City: _____ State: _____ Zip: _____

Routing Number: _____ Account Number: _____

Account Type (Please select one): Checking _____ Savings _____

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name: _____ Last 4 Digits Tax ID#: _____

Phone #: _____ Email (*required*): _____

Date: _____ Signature: _____

STAPLE CHECK HERE

John Doe 123 Main Street Anytown, USA	_____ 20 _____	2833
Pay to the order of _____	\$ _____	Dollars
T rust Company Bank Atlanta, Georgia		
MEMO _____		
: xxxxxxxx : xxxxxx • xxxxx		

Routing – Transit No. Personal Account No. Check No.

Please return to: EQT Production Company
Attn: Owner Relations
400 Woodcliff Dr Canonsburg, PA 15317