

New

Change

Cancel

**FIRST – Print Owner Name, Owner Number, Owner Mailing Address, Owner TIN or Social Security Number:**

\_\_\_\_\_  
Owner Name

\_\_\_\_\_  
Owner Number (123456-01)

\_\_\_\_\_  
TIN or SSN

\_\_\_\_\_  
Street Address or P.O. Box

\_\_\_\_\_  
City, State – Zip Code

**SECOND – Select Owner Account Type for Direct Deposit (check one):**     Checking     Savings

**THIRD – Sign and date the enrollment form:**

I authorize El Paso E&P Company, L.P. and my financial institution referenced below to electronically deposit my payment to the account specified. This authority will remain in effect until I have filed a new authorization. I understand that I can change my account or financial institution arrangement by completing a new Direct Deposit form available from El Paso E&P Company, L.P. Owner Relations Unit.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Daytime Phone

**FOURTH – Attach a voided check with the name matching that entered at the top of the form, or take this form to your financial institution. (\* required)**

If a voided check is not attached, or if depositing into a savings Account, your financial institution's "ACH" direct deposit personnel must provide the information below and match it with the name and TIN or social security number (noted in #1 above) to ensure no delay due to incorrect bank routing information.

\_\_\_\_\_  
\* Bank Routing (ABA) # (9 digits):

\_\_\_\_\_  
\* Name of Financial Institution:

\_\_\_\_\_  
\* Financial Institution Address

\_\_\_\_\_  
\* City, State & Zip

\_\_\_\_\_  
\* Checking or Savings Account #:

\_\_\_\_\_  
Bank Representative Name & Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone #:

**FIFTH – Mail completed form to:**

El Paso E&P Company, LP  
Attn: Owner Relations 27<sup>th</sup> Floor  
PO Box 2511 Houston, TX 77252  
713-420-3839 Owner Relations Fax

Should you have any questions regarding direct deposit, please contact El Paso E&P Company, L.P. Owner Relations Department at 713-420-1200.