

## **DIVIDEND REINVESTMENT PLAN APPLICATION OR VARIATION FORM** 2023

Hepburn Community Wind Park Co-operative Limited, ABN 87 572 206 200, Reg No. G0003442Y

**Instructions:** 

This form is to be completed where the securityholder wishes to have their payments reinvested under the rules of the EQT Holdings Limited Dividend Reinvestment Plan (the Plan).

Please use a **BLACK** pen. Print **CAPITAL** letters inside the shaded areas Where a choice is required, mark the box with an 'X'

A copy of the rules of the Plan can be found at www.hepburnenergy.coop/membership/

Please post the completed form to: Hepburn Energy

PO Box 225, Daylesford VIC 3460, Australia

MEMBERSHIP DETAILS:		
Full Name of Registered Holdin	ng:	Securityholder Reference Number (SRN)
Primary Contact Name: (if diffe	rs from above)	SRNs should begin with the letter I, then zero (0) and then the number eg I09900112345
Account Designation (if applicable)		
Registered Address:		
Town/Suburb:		State:
Country:		Postcode:
I/We being the above-named holder of registered securities wish to participate in the plan as indicated below. This will cancel any earlier Plan instructions and take priority over any direct credit instructions.		
REINVESTMENT PLAN APPLICATION OR VARIATION DETAILS:		
FULL PARTICIPATION Including any further acquisitions		
PARTIAL PARTICIPATION  Please specify the number of shares you would like to participate in the plan:		
<u> </u>		
I/We authorise the application of the payment to me/us with respect to the number of securities participating in the Plan at		
the price and subject to the rules of the Plan.  I/We hereby agree to be bound by the rules of the Plan in subscribing for additional securities.		
I/We acknowledge that I/we may vary or cancel my/our participation in the Plan, in accordance with the rules of the Plan.		
<b>CANCEL PARTICIPATION</b> Please mark this box with an "X" if you wish to cancel your Plan participation		
SIGNATURE(S) OF SECURITYHOLDER(S) - THIS MUST BE COMPLETED		
Signature:	Signature:	Signature:
5.6. (a.c.)	5,8.18.63.61	5.6.1.000
Signing Instructions: This form s	hould be signed by the security holder. If	f a joint holgin, all
security holders should sign. If signed by the securityholder's attorney, the power of attorney  Date:  Date:		
executed by a company, the form must be excited in accordance with the company's constitution and the <i>Corporation Act 2001 (Cth)</i> (or for New Zealand companies, the <i>Companies</i>		

Act 1993)