# Instructions for E-Payment of <u>Annual Exploration License Fees</u>

You may make <u>checks</u> payable to DEQ Financial Services Office and mail them to:

DEQ
Financial Services Office
PO Box 200901
Helena, MT 59620-0901

If you wish to pay <u>electronically</u> follow the instructions below.

**NOTE: DEQ will not enter electronic payment information on your behalf.** If you have questions using the e-payment method, please contact the DEQSMESandExploration@mt.gov.

1.  Go to DEQ's webpage at https://deq.mt.gov.  You will arrive at our home page – select "Pay a Bill" from the Quick Links list on the left side of the page.
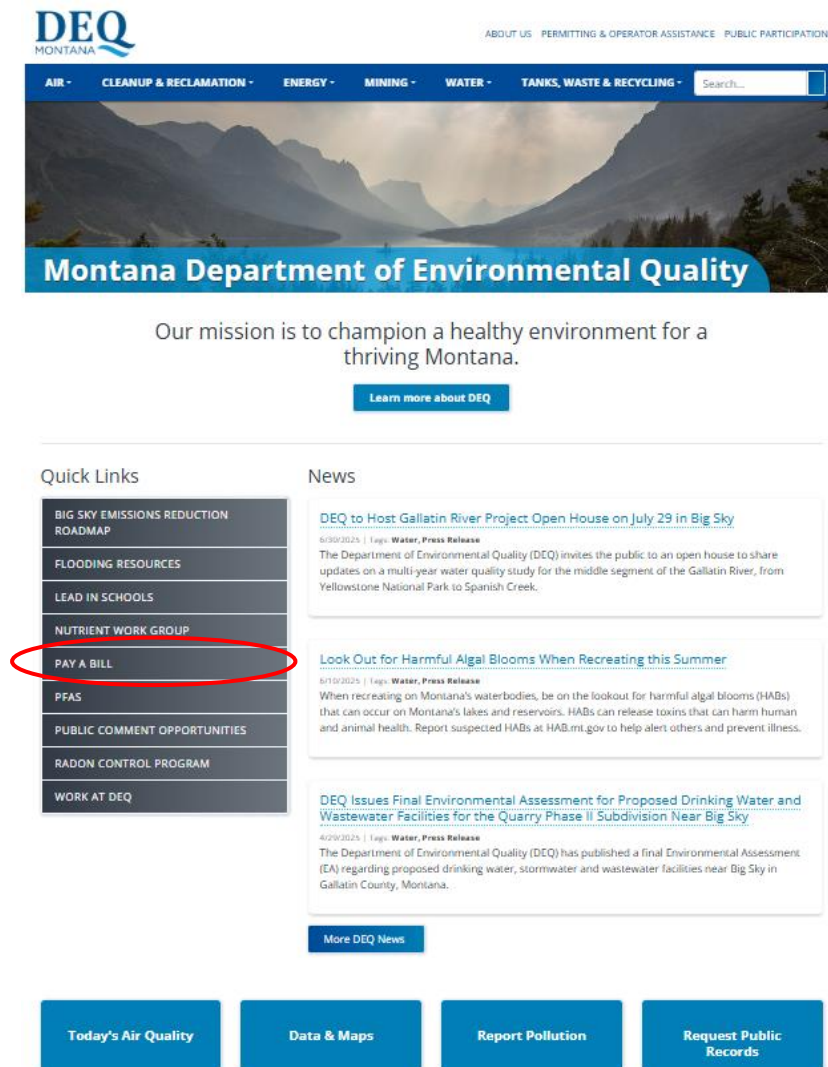
2. Log in with your State of Montana Okta "ePass" account using the "Login" button. If you do not have an account, select the "Have questions?" link below the login button for instructions on how to create an account.
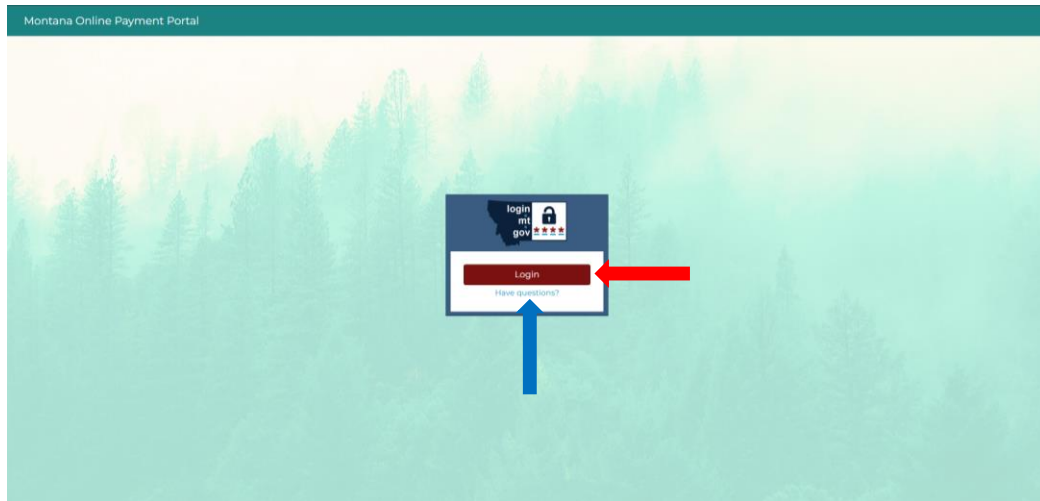


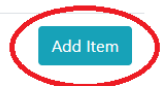3. Select your Payment Type.  Click the radio button adjacent to the type of payment method you will be using.



4. Click the Add Item button.

5. You will now need to select an item from a list of invoice types.  Select the invoice type that matches your invoice number **"Invoice Starts With..."** and click on the "Add" button adjacent to the correct Item.

| Add An Item | | | ✕ |
|---|---|---|---|
| **Item** | **Item Cost** | | |
| Invoice Starts With 1A..... | Custom | Add | |
| Invoice Starts With 3A..... | Custom | Add | |
| Invoice Starts With 4A..... | Custom | Add | |
| Invoice Starts With 4B..... | Custom | Add | |
| Invoice Starts With 4C..... | Custom | Add | |
| Invoice Starts With 5A..... | Custom | Add | |
| Invoice Starts With 5B..... | Custom | Add | |
| Invoice Starts With 5C..... | Custom | Add | |
| Invoice Starts With 5D..... | Custom | Add | |
| Invoice Starts With 5E..... | Custom | Add | |
| Invoice Starts With 5F..... | Custom | Add | |
| Invoice Starts With 5G..... | Custom | Add | |

Add the item that matches your invoice #

Cancel

6. Add the following information to the form. The form does not have validation.  Please enter the information as described on your invoice to ensure you appropriately receive credit for your annual fee payment.
   a. The Item Cost: enter the amount due shown on your invoice. **Do not combine multiple annual fees into a single item.**
   b. Customer Number
   c. Business/Customer Name
   d. Invoice #
   e. Retype the Invoice #

The following is an example for Exploration License fee for Customer Number: ExampleCustomer123, Business/Customer Name: Exploration Company Inc., Invoice # 5I123456

**Items**                                                                    Danesi, Don
                                                                             Log Out

Payment Type *
◉ Credit/Debit Card
○ ACH (eCheck)

| Item | | Item Cost | Item Total |
|------|---|---|---|
| Invoice Starts With 5I..... | 1    400 | | $400.00 |

Customer Number *
ExampleCustomer123
Your Customer Number is on your invoice

Business / Customer Name *
Exploration Company, Inc.

Invoice 5I# *
5I123456

Retype Invoice 5I# *
5I123456

Total        $400.00

Add Item

Reset  Next

Once you have populated the information on the form, click the "**Next**" button to enter your payment details.  Alternatively, you can add additional fees by clicking the "**Add Item**" button.  If you add additional annual fees, you will need to repeat steps 4 and 5.

7.  Enter your Billing Information.  This is for the card holder.  All fields with red asterisks are required.  **Please enter your email address to receive a receipt for your electronic payment.**

**Payment Summary**

| Item | Quantity | Item Cost | Item Total |
|------|----------|-----------|------------|
| Invoice Starts With 5I..... | 1 | $400.00 | $400.00 |
| | | Total | $400.00 |

**Details**

**Billing Information**

First Name *

Last Name *

Address *

Address Line Two

City *

Country
United States

State *
Montana

Zip Code *

Phone *

Email Address

Back  Cancel  Next

8. Enter Payment Information.  All fields with red asterisks are required.  You will also need to click the Accept Agreement box.

**Payment Summary**

| Item | Quantity | Item Cost | Item Total |
|---|---|---|---|
| Invoice Starts With 5I..... | 1 | $400.00 | $400.00 |
| | | Total | $400.00 |

**Payment Information**

Card Number *

Expiration Date *                      Security Code *

MMYY                                   CVV
                                       This can be found on the back of your card

**User Agreement**

By entering your credit card and/or checking account information you (1) state that **you are an authorized user** of the credit card and/or electronic check and that the associated information entered (e.g., account holder name, account number, billing address) is accurate, (2) **you authorize the payment processor to charge the amount you have requested** to your credit card and/or funding account, (3) **if this is a recurring payment, you authorize the payment processor to charge the amount you have requested** in accordance with the recurring payment schedule, (4) **acknowledge if a charge is declined or reversed you may also be assessed a customary charge** by the payment processor for such transactions.

Accept Agreement * ☐

Back    Cancel    Submit Payment

9. Once your information is entered, click the "Submit Payment" button.

**Payment Summary**

| Item | Quantity | Item Cost | Item Total |
|---|---|---|---|
| Invoice Starts With 5I..... | 1 | $400.00 | $400.00 |
| | | Total | $400.00 |

**Payment Information**

Card Number *

Expiration Date *                      Security Code *

MMYY                                   CVV
                                       This can be found on the back of your card

**User Agreement**

By entering your credit card and/or checking account information you (1) state that **you are an authorized user** of the credit card and/or electronic check and that the associated information entered (e.g., account holder name, account number, billing address) is accurate, (2) **you authorize the payment processor to charge the amount you have requested** to your credit card and/or funding account, (3) **if this is a recurring payment, you authorize the payment processor to charge the amount you have requested** in accordance with the recurring payment schedule, (4) **acknowledge if a charge is declined or reversed you may also be assessed a customary charge** by the payment processor for such transactions.

Accept Agreement * ☐

Back    Cancel    Submit Payment

10. Please forward the receipt you received via email to DEQSMESandExploration@mt.gov