



HIDALGO COUNTY, TEXAS

APPLICATION FOR OFFICIAL TRAVEL

DATE OF REQUEST: 01/03/13

TOTAL NUMBER OF EMPLOYEES TRAVELING: 1

DEPARTMENT NAME: Safety Division

NAME & TITLE OF EMPLOYEE(S) TRAVELING: Armando Guzman, Safety Officer

EVENT INFORMATION

TITLE OF EVENT: MSW B Supervisor Course

EVENT DATE(S) FROM: 02/11/13 TO: 02/14/13

DEPARTURE DATE: 02/10/13 RETURN DATE: 02/15/13

LOCATION OF EVENT: CITY: Denton STATE: Texas

PURPOSE OF TRAVEL

- Place an "X" by the applicable purpose of the trip.
- To obtain statutorily required continuing professional education.
 - To obtain continuing education related to an employee's work or maintenance of a license or certification.
 - To testify before legislative bodies, regulatory agencies and commissions, and other forums that may make decisions affecting the County and its affiliated organizations and operations.
 - To participate in professional organizations related to the employee or official's job assignment.
 - To conduct essential research & information-gathering for improvement of County operations or compliance with law.
 - To monitor the development of state or federal legislation or implementation of legislation that might affect the County
 - To participate in forums, coalitions, & discussions relating to the policy, legislative & regulatory interests of the County
 - To pursue the County's interests in litigation or criminal justice.
 - To promote the economic development interests of the County.
 - To carry out other purposes determined by Commissioners' Court to be in the interest of the County.

JUSTIFICATION FOR THE NEED TO TRAVEL OUT-OF-STATE

Explain the benefits that this trip it will bring to Hidalgo County. Attach an itinerary, agenda, or schedule for the conference and/ or event. If applicable, justify the need for multiple persons traveling to the same event.

SUMMARY OF ESTIMATED TRAVEL EXPENSES	ESTIMATED EXPENSES	(DBM USE ONLY) FUNDS AVAILABLE BALANCE	MODE OF TRAVEL <small>(Place an "X" by applicable mode of travel)</small>
1. REGISTRATION FEE(S) <i>Req# 228368</i>	\$ 650.00		AIRFARE*
Subtotal for Object Code 584	\$ 650.00	\$	BUS**
2. AIRFARE- ROUNDTRIP COACH FARE ONLY	\$ -		Rental Car**
3. TAXI FARE	\$ -		County Vehicle**
4. BUS FARE	\$ -		Private Vehicle**
5. RENTAL CAR	\$ -		OTHER** (Specify)
6. GASOLINE/DIESEL/FUEL	\$ -		* If traveling by airplane, the traveler should consider purchasing a refundable fare if possibility of a cancellation exists.
7. MILEAGE REIMBURSEMENT	\$ -		
8. TELEPHONE CALLS	\$ -		** If mode of travel includes bus, rental car, county vehicle, private vehicle, or other form of transportation, a comparison of the savings that will be achieved by not choosing to travel by airplane must be provided with supporting documentation.
9. PARKING	\$ -		
10. LODGING <i>Req# 228360</i>	\$ 435.05		
11. MEALS <i>Req# 228372</i>	\$ 225.00		
12. OTHER EXPENSES	\$ -		
Subtotal for Object Code 583	\$ 660.05		
13. TOTAL ESTIMATED TRAVEL EXPENSES	\$ 1,310.05	\$	

14. IF HIDALGO COUNTY IS NOT FUNDING ANY OR PART OF THIS TRIP, INDICATE BELOW THE EXPENSE TYPE & SOURCE OF PAYMENT:

NOTE: If trip duration is extended to take advantage of lower airfare, a comparison of the savings to the additional estimated cost must be provided with supporting airfare rate documentation.

ELECTED OFFICIAL/DEPARTMENT HEAD CERTIFICATION (Place an "X" by each of the certifications)

- I certify that:
- Trip expenses are necessary and will be incurred for official county business.
 - Reasonable efforts to minimize the use of county funds have been explored.
 - Sufficient funds are available within in my department's budget to pay for the related travel expenses without the need of a budget amendment.

If this trip is for out-of-state training, the training is not available in some other form that does not require out-of-state travel.

APPROVED BY ELECTED OFFICIAL/DEPARTMENT HEAD: *[Signature]* DATE: 1/3/13 DEPARTMENT CONTACT PERSON: Roy Quintanilha PHONE NO.: 292-7030

FOR DEPARTMENT OF BUDGET & MANAGEMENT (DBM) USE ONLY:

TRAVEL IS **APPROVED** for the individuals listed below:

TRAVEL IS **NOT APPROVED** for the individuals listed below:

REVIEWED BY (PRINT NAME): *Vernica Ortiz* DATE: 1/3/13 REVIEWER'S SIGNATURE: *[Signature]* PHONE NO.: 292-7025

DBM'S DEPARTMENT HEAD APPROVAL (PRINT NAME): DATE: SIGNATURE OF DBM DEPARTMENT HEAD:



HIDALGO COUNTY, TEXAS OUT-OF-COUNTY – TRAVEL ADVANCE REQUEST

A. TRIP AND TRAVELER INFORMATION

EMPLOYEE NAME:	Armando Guzman Jr	EMPLOYEE I.D. NO.:	129356	EMPLOYEE TITLE:	Safety Officer
DEPARTMENT:	Safety Division	DO YOU HAVE AN OUTSTANDING TRAVEL ADVANCE?	no		
DEPARTURE DATE:	2/10/13	RETURN DATE:	2/15/13		
TIME OF DEPARTURE:	8:00 AM	TIME OF RETURN:	7:00 PM		
TO CITY:	Denton	STATE:	Texas		
SEMINAR/CONFERENCE/MEETING:	START DATE: 2/11/2013	END DATE: 2/14/2013	ACTUAL NO. OF DAYS:	4	
TITLE OF WORKSHOP/CONFERENCE:	MSW B Supervisor Course				
METHOD OF TRAVEL (AIR TRAVEL/ PERSONAL VEHICLE/ COUNTY VEHICLE/ CAR RENTAL):	County Vehicle	IS COORDINATION OF TRAVEL REQUIRED? IF NO, ATTACH WRITTEN EXPLANATION FROM THE COUNTY OFFICIAL.			
LIST NAMES OF COUNTY EMPLOYEES TRAVELING WITH YOU IN THE COUNTY VEHICLE, CAR RENTAL, OR PERSONAL VEHICLE?					
DO YOU HAVE A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT?	yes	IF YES, EXPLAIN REASON FOR NOT UTILIZING COUNTY VEHICLE?			
PURPOSE/BENEFIT TO HIDALGO COUNTY:	Acquire MSW B Supleprisor License				

B. ESTIMATED EXPENSES:

I. MEALS: (Meals for one-day travel not requiring an overnight stay will not be advanced)									
Meals will be prorated for partial days	Meal Rate	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	Total
		10-Feb	11-Feb	12-Feb	13-Feb	14-Feb	15-Feb		
Breakfast	\$9.00		\$9.00	\$9.00	\$9.00	\$9.00	\$9.00		\$45.00
Lunch	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00	\$12.00		\$72.00
Dinner	\$18.00	\$18.00	\$18.00	\$18.00	\$18.00	\$18.00	\$18.00		\$108.00
Total	\$39.00	\$30.00	\$39.00	\$39.00	\$39.00	\$39.00	\$39.00	\$0.00	\$225.00

Meal per diems must be prorated for 1st day and last day of travel as follows:

Departure:	Arrival:
Before 8:00 a.m. (breakfast, lunch, & dinner)	Before 8:00 a.m. (breakfast)
8:00 a.m. - 1:00 p.m. (lunch & dinner)	8:00 a.m. - 6:00 p.m. (breakfast & lunch)
After 1:00 p.m. (dinner)	After 6:00 p.m. (breakfast, lunch, & dinner)
\$ 39.00	\$ 9.00
\$ 30.00	\$ 21.00
\$ 18.00	\$ 39.00

II. INCIDENTAL EXPENSES (taxi fare, shuttle fare, gas charges for car rentals, airport and hotel parking):

Expense type: _____ days @ \$ 20.00 \$ -

III. PERSONAL VEHICLE MILEAGE _____ Miles @ \$ 0.510 (Current Rate) \$ -

(Note: Mileage may be advanced calculated on a point-to-point basis using "Mapquest" at the current county adopted rate per highway mile. Incidental mileage will not be advanced. In addition, "Coordination of Travel" may apply (see Section 7 of the Travel Policies, Guidelines, and Procedures). When traveling out of state, if the most economical means of travel is driving, traveler must supply documentation to support the price of the airfare at the time of travel.

[Mapquest](#)

IV. OTHER (Itemize)

_____ \$ _____

_____ \$ _____

V. P.O. # ISSUED UNDER EMPLOYEE'S NAME FOR THE AMOUNT OF THE TRAVEL ADVANCE:	VI. TOTAL TRAVEL ADVANCE REQUESTED: \$ 225.00
VII. COMMENTS:	VII. GENERAL LEDGER ACCOUNT NUMBER: 3-1100-419-20-125-003-0-583

C. CERTIFICATION AND AUTHORIZATION TO PAYROLL DEDUCTIONS

I hereby certify that information provided on this form is true and estimated expenditures are reasonable and necessary. The funds will be used by me for the specific trip listed above and not given to or used by another county employee. If my trip is cancelled, I will immediately return the travel advance funds to the County Treasurer no later than 20 calendar days after the seminar/conference/ meeting end date by submitting a Final Travel Expense Claim. In addition, I agree to account for all travel expenditures including the travel advance by submitting a Final Travel Expense Claim, accompanied by required original supporting documentation, no later than 20 days after my seminar/conference/meeting end date. Any unused funds will also be returned to the County Treasurer's Office no later than 20 days after my seminar/conference/meeting end date.

Should I fail to submit a Final Travel Expense Claim, I understand that I will not be allowed to obtain another travel advance until the pending travel advance is settled. In addition, I agree to repay Hidalgo County and further consent to payroll deductions by the County Treasurer to recover the pending travel advance amount.

 EMPLOYEE SIGNATURE	Roy Quintanilha DEPARTMENT OFFICIAL'S NAME (Print Name)	 DEPARTMENT OFFICIAL'S APPROVAL (Signature)
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**HIDALGO COUNTY, TEXAS
SEMINAR, HOTEL, CAR RENTAL, AND AIRFARE
CHECK REQUEST FORM
PAGE 1 OF 2**


DEPARTMENT:	Safety Division		
DEPARTURE DATE:	2/10/2013	RETURN DATE:	2/15/2013
TO CITY:	Denton	STATE:	Texas
NAME OF EMPLOYEES ATTENDING SEMINAR:	Armando Guzman		
TOTAL# OF EMPLOYEES ATTENDING SEMINAR:	1		
PURPOSE/BENEFIT TO HIDALGO COUNTY:	Acquire MSW B Supervisor License Certification		

A. WORKSHOP/SEMINAR REGISTRATION(S)

TITLE OF WORKSHOP/SEMINAR:	MSW B Supervisor Course		
SPONSORED BY:	Texas Environmental Training & Compliance		
REGISTRATION CHECK PAYABLE TO:	TETC		
REGISTRATION ADDRESS:	PO BOX 31	SEMINAR START DATE:	2/11/2013
	FROST, TX 76641	SEMINAR END DATE:	2/14/2013
		PURCHASE ORDER NO.	
1. REGISTRATION COST PER EMPLOYEE:	\$ 1.00	NO. OF EMPLOYEES ATTENDING AT THIS RATE:	650
2. REGISTRATION COST PER EMPLOYEE:		NO. OF EMPLOYEES ATTENDING AT THIS RATE:	
3. "FREE REGISTRATION COST:	"FREE"	NO. OF EMPLOYEES ATTENDING FOR "FREE":	
GL ACCT NO.:	3-1100-419-50-125-003-0-584	TOTAL NO. OF EMPLOYEES ATTENDING:	650
TOTAL COST OF SEMINAR (Registration Cost per Employee x Number of Employees Attending at a rate) A.	\$	650.00	
<i>(SEE PAGE 2 FOR SECTIONS B, C, & D)</i>		TOTAL THIS PAGE (A):	\$ 650.00
		TOTAL 2ND PAGE (B + C + D):	\$ 435.05
		GRAND TOTAL (A + B + C + D)	\$ 1,085.05

E. CERTIFICATIONS AND EMPLOYEE AUTHORIZATIONS FOR PAYROLL DEDUCTIONS

DEPARTMENT'S PUBLIC OFFICIAL CERTIFICATION: I hereby certify that trip expenditures are necessary and will be incurred for official county business. Reasonable efforts to minimize the use of county funds have been explored. The information and estimates provided on this form are true and as accurate as possible. If it becomes necessary to cancel a trip, all necessary cancellations and notices will be made to the applicable vendors and departments in accordance with the Travel Policy, Guidelines, and Procedures. Travelers have read the Travel Policy, Guidelines, and Procedures and understand that failure to cancel reservations for any reasons other than those allowed by the Travel Policy will be at their expense.

	ROY QUINTANILHA	292-7030
DEPARTMENT'S PUBLIC OFFICIAL (Signature)	DEPARTMENT'S CONTACT PERSON	PHONE #

TRAVELER'S AUTHORIZATION: I certify that if it becomes necessary to cancel a trip, all necessary cancellations and notices will be made to the applicable vendors and departments in accordance with the Travel Policy, Guidelines, and Procedures. If I fail to cancel reservations for reasons other than those allowed by Section 17 of the Travel Policy, Guidelines, and Procedures, I authorize the deduction of any travel expenses incurred by the county on my behalf from my payroll check.

ARMANDO GUZMAN JR.		129356
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.



**HIDALGO COUNTY, TEXAS
SEMINAR, HOTEL, CAR RENTAL, AND AIRFARE
CHECK REQUEST FORM
PAGE 2 OF 2**

DEPARTMENT: Safety Division
 DEPARTURE DATE: 2/10/2013 RETURN DATE: 2/15/2013
 TO CITY: Denton STATE: Texas
 NAME OF EMPLOYEES ATTENDING SEMINAR: Armando Guzman
 TOTAL# OF EMPLOYEES ATTENDING SEMINAR: 1

B. HOTEL RESERVATION(S)

Note: Use of a travel agency is discouraged. Unless a benefit is achieved by other means, you must use the State of Texas travel management services contract by visiting: www.window.state.tx.us/procurement/prog/stmp/

NAME OF HOTEL: BEST WESTERN HOTEL PHONE NO: 800-780-7234
 ADDRESS OF HOTEL: 2450 BRINKER RD CONFIRMATION NO.(S): 32746
DENTON, TEXAS 76208
 ROOM RATE: \$ 77.00 PURCHASE ORDER NO. _____
 NUMBER OF NIGHTS: 5 GENERAL LEDGER ACCT NO: 3-1100-419-50-125-003-0-583
 ROOM RATE: _____ TOTAL NO. OF ROOMS: 1
 NUMBER OF NIGHTS: _____
 ROOM RATE: _____ HOTEL TAX RATE: 13.00%
 NUMBER OF NIGHTS: _____
 TOTAL CHECK AMOUNT FOR HOTEL (Daily Room Rate x No. of Rooms x No. of Days x Tax Rate) B. \$ 435.05

C. CAR RENTAL(S)

Note: Reservations for car rentals made under the name of Hidalgo County are required to be made through the State of Texas travel management services contract by visiting: www.window.state.tx.us/procurement/prog/stmp/

IS A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? YES / NO YES IF YES, EXPLAIN REASON FOR NOT UTILIZING IT? Attach memo if more space needed. _____
 NAME OF CAR RENTAL COMPANY: _____
 ADDRESS OF CAR RENTAL COMPANY: _____
Note: Coordination of travel is required for every group of 4 or less
 PHONE NUMBER OF CAR RENTAL COMPANY: _____
 VEHICLE NO. 1 TYPE: _____ VEHICLE NO. 2 TYPE: _____
 DAILY CAR RATE: _____ DAILY CAR RATE: _____
 NUMBER OF DAYS: _____ NUMBER OF DAYS: _____
 CONFIRMATION NO.: _____ CONFIRMATION NO. _____
 VEHICLE NO. 1 - NAMES OF EMPLOYEES TRAVELING: _____ VEHICLE NO. 2 - NAMES OF EMPLOYEES TRAVELING: _____
 PURCHASE ORDER NO. _____ GL ACCT NO: _____
 TOTAL CHECK AMOUNT FOR CAR RENTAL (Daily Car Rate x No. of Days) C. \$ -

D. AIRFARE(S)

Note: Use of a travel agency is discouraged. Refundable fares should be considered if possibility of a trip cancellation exists.

NAME OF AIRLINE COMPANY: _____
 ADDRESS OF AIRLINE COMPANY: _____
 PHONE NO. OF AIRLINE COMPANY: _____ CONFIRMATION NO.: _____
 ROUND TRIP AIRFARE PER PERSON: _____
 NUMBER OF TRAVELERS: _____
 GENERAL LEDGER ACCOUNT NUMBER: _____ P.O. NO. _____
 TOTAL CHECK AMOUNT FOR AIRLINE COMPANY D. \$ -

SUBTOTAL (B+C+D) \$ 435.05



TETC 2013 TRAINING SCHEDULE

<u>MSW A Supervisor Course</u>		<u>MSW B Supervisor Course</u>		<u>WasteScreening</u>		<u>Medical Waste</u>	
<u>DATE</u>	<u>LOCATION</u>	<u>DATE</u>	<u>LOCATION</u>	<u>DATE</u>	<u>LOCATION</u>	<u>DATE</u>	<u>LOCATION</u>
January 14-17	Houston	February 11-14	Denton	March 6	Grand Prairie	July 2	Dallas
April 22-25	Lubbock	May 13-16	Houston	September 20	Houston	December 6	Houston
June 10-13	Dallas	August 12-15	Grand Prairie				
October 14-17	Denton	November 4-7	Lubbock				
<i>Call to set up an unscheduled class</i>		<i>Call to set up an unscheduled class</i>		<i>Call to set up an unscheduled class</i>		<i>Call to set up an unscheduled class</i>	

REGISTRATION PROCESS

- Pre-Registration is mandatory to obtain course location information, etc.
- Complete the registration form or register through the TETC website at www.TETC-env.net
- Complete one form per student or duplicate as needed.
- Full payment must be received 10 business days before the course to qualify for Early Registration Fee. Purchase Orders do not qualify as full payment
- Upon full payment, TETC will forward course information to student. IF requested, manuals can be sent in advance of the class. If manuals are sent ahead, a mailing and handling charge will be assessed.
- Course Completion Certificate or notification to the TCEQ of course completion will not be issued until full payment is received.

REGISTRATION

Fax to: 972-692-7746

Please print CLEARLY. Fill out form COMPLETELY.

or

P.O. #: _____

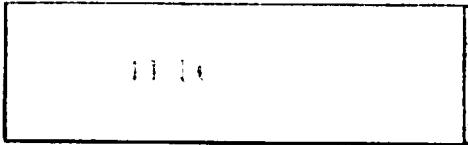
Email to: info@tetc-env.net

Student Name: Armando Guzman Jr Company Name: Hidalgo County Safety Division
 Email: rosie.luna@co.hidalgo.tx.us Phone: 956-292-7030 Fax: 956-318-2658
 Address: P.O. Box 1356 City/State/Zip: Edinburg, Tx 78539
 Course Name: MSW B Supervisor Course Course Date: Feb. 11-14, 2013 Full Renewal

TETC
 P.O. Box 31
 Frost, Texas 76641
 Office: 903-695-0288
 Fax: 972-692-7746
 Email: info@tetc-env.net
www.TETC-env.net

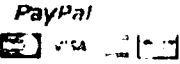
If registered student is unable to attend class:

- No charge if cancelation or transfer is complete 10 calendar days before the start of the course.
- 70% refund if attendance is cancelled less than 10 calendar days before course begins.
- A \$40.00 transfer fee if course transfer is requested less than 10 calendar days before the start of the course.



Course B. - Registration and Policies

[Pulse aquí para ver la página en español](#)



TETC uses the simple and secure PayPal service.
We do not store credit card information!

You do not have to register for a PayPal account, just have an email address.

All students at the end of a course must have a check or money order in the amount of \$111.00 made payable to TCEQ. Cash or credit cards will not be accepted.

B Course - Processing Operations

This 30 hour course covers regulatory, management, and operational knowledge meeting the educational requirements for a MSW B Supervisor's License. This course is intended for supervisors of Type V, Processing and Composting facilities that are permitted or registered.

You have two (2) options. Option A is the 30 hour course. Option B is the course *renewal*.

MSW B Supervisor Course	Regular Course	Renewal Course
	Early Registration - \$615 Standard Registration - \$650 30 Hour Course	Early Standard Standard Registration 16 Hour Course
Date/Location/Map Links	Select your option from the box below when making your purchase	Select your option from the box below when making your purchase
November 26-29, 2012 Plano	Early-Standard Early \$615.00 USD	Early-Standard Early \$500.00 USD
December 3-8, 2012 Kingville (Closed)	Date/Location February 11-14, 2013 Denton	Date/Location February 11-14, 2013 Denton
February 11-14, 2013 Denton	Add to Cart	Add to Cart
May 13-16, 2013 Houston		
August 12-15, 2013 Grand Prairie		
November 4-7, 2013 Lubbock		

[Call to Setup Unscheduled Classes](#)

COURSE REGISTRATION PROCESS

1. Pre-registration is mandatory for us to ensure adequate materials are provided to the course location.
2. Two Options to register:
 - OPTION A: Complete the registration form with one form per student. Fax to (972) 692-7746
 - OPTION B: Register above by clicking on one of the options in the red box area. Students must call (903) 695-0288 if trying to register with less than 3 business days before the course!
3. Submit registration form and payment. Remember full payment must be received 10 business days before course begins to qualify for Early Registration Fee. Only a check, credit card or on-line payment qualifies as full payment for Early Registration Fee. Purchase Orders do not qualify as full payment.
4. If requested, course manuals can sent in advance of the class for mailing and handling charges.
5. Course Completion Certificate or notification to a state regulatory agency will not be issued until the full payment of course.
 1. No charge if cancellation or course transfer is completed 10 calendar days before start of the course.
 2. 70% fee refund if attendance is canceled less than 10 calendar days before course begins.
 3. A \$40.00 transfer fee if course transfer is made within 10 calendar days before course begins.

Complimentary courses

TETC provides complimentary courses to employees of state regulatory agencies size permitting. They must call first! TETC provides a complimentary course to the hosting organization if the class size reaches 12.

COURSE CANCELLATION

Courses may be canceled if a minimum number of 10 students has not registered five (5) calendar days prior to start date of course.

All registered students will be notified of the cancellation.

Registrations will be transferred to another course or refunded at no charge.

Rosie Luna

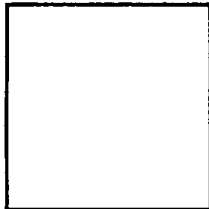
From: Nielda Cavazos [nielda.cavazos@co.hidalgo.tx.us]
Sent: Thursday, January 03, 2013 11:20 AM
To: 'Rosie Luna'
Subject: FW: BEST WESTERN PREMIER CROWN CHASE Confirmation 32746

Here you go

*city/state
13070 704*

nielda.cavazos@co.hidalgo.tx.us

From: stay@bwdenton.com [<mailto:stay@bwdenton.com>]
Sent: Thursday, January 03, 2013 10:42 AM
To: NIELDA.CAVAZOS@CO.HIDALGO.TX.US
Subject: BEST WESTERN PREMIER CROWN CHASE Confirmation 32746



2450 BRINKER ROAD
DENTON, TX 76208

Voice: (940) 387-1000
Fax: (940) 387-1001
Email: stay@bwdenton.com

Name:	ARMANDO GUZMAN
Arrival Date:	02/10/13
Departure Date:	02/15/13
Check-in Time:	3.00 PM
Check-out Time:	12.00 PM

Guests: 1 Adult(s), 0 Children

Room Type: 1 KING PLUS NSM SOFABED (KP)

Rate Type: Daily
Number of Nights: 5
Average Daily Rate: 77.00

- - 0.00
- - 0.00

Should you need to cancel your reservation, please contact us. Cancellations are required by 4:00 PM (local hotel time) the day of your arrival date, unless otherwise noted. Cancelling your reservation after 4:00 PM (local hotel time), or failing to show, will result in a charge equal to the first night's stay per room on your credit card. Taxes may apply. Failure to call or show before check-out time after the first night of a reservation will result in cancellation of the remainder of your reservation.

Traveling Interstate 35E North: Follow to Exit 463, continue on Frontage Road one mile, turn right onto Brinker Road. The BEST WESTERN PREMIER Crown Chase Inn & Suites will be on your left.

Traveling Interstate 35E South towards Dallas: Follow to Exit 462 (State School Road). At the light turn left and at the next light turn left. Follow the service road Northbound for one mile. The BEST WESTERN PREMIER Crown Chase Inn & Suites will be one mile on the right behind the On the Border

Status Match...No Catch
With our Status Match...No Catch® program, we will match your ELITE status in any other hotel loyalty program, FREE of charge. To match your ELITE status in any other hotel program, download the Status Match... No Catch form, provide us with proof of elite status with another hotel program, and we'll take of the rest! Question? Email or call us at 1-800-444-7646.

Stay connected with BEST WESTERN PREMIER Crown Chase Inn & Suites wherever you go:

At Best Western we appreciate your business and want to assure you are satisfied. Best Western is very confident in Our Lowest Rates Guaranteed Program and want you to continue to be. If you have found a lower rate on another website for the same Best Western branded hotel we want to hear about it. You must advise us within 24 hours of making your reservation on www.bestwestern.com

56.05