



## Local Emergency Planning Committee Membership Update Form

State Emergency Response Commission c/o TDEM  
Operations Section  
2883 Highway 71 E, PO BOX 285  
Del Valle, TX 78617  
E-mail: [TechHaz@tdem.texas.gov](mailto:TechHaz@tdem.texas.gov)



**Boxes 1-4 MUST be completed when submitted**

<b>Box 1:</b>	
<i>Box 1 MUST be filled in and <b>SIGNED</b> by the County Judge or appointed EMC before returning form(s) to the SERC</i>	
Legal Name of LEPC: Hidalgo County Local Emergency Planning Committee	
County/Countries: Hidalgo	Is this your entire LEPC membership listing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
County Judge's First Name: Richard	Last Name: Cortez
County Judge's Approval ( <i>signature required</i> ):	Date:

### LEPC Membership Categories

*(In accordance with Public Law 99-499, Section 301(c))*

*Note: Information may be released to the public under the Texas Open Records Act. Use your work address and phone number.*

State/Local Official	SLO	Health Department	HD	Information Officer	IO
Emergency Management	EM	Hospital	HOS	Print/Broadcast Media	PBM
Emergency Medical Service	EMS	Law Enforcement	LE	Community Group	CG
Private Industry	PI	Local Environmental Group	LEG	Transportation Personnel	TP
Fire Department	FD	Ind. School District	ISD	Other	OTH

<b>Box 2: Chairperson Update Information</b>		
Salutation: Mr.	First Name: Gustavo	Last Name: Ramirez
Job Title: Fire Chief	Phone: 956-655-3402	
Contact Email: gus.ramirez@alton-tx.gov	Fax Number:	
Organization/Agency: Alton Fire Department	LEPC Membership Category: FD	
Address: 201 W Dawes Ave		
City: Alton	State: TX	Zip Code: 78574

<b>Box 3: Vice Chairperson Update Information</b>		
Salutation: Mr.	First Name: Pedro	Last Name: Bustamante
Job Title: Captain	Phone: 956-292-8475	
Contact Email: pedro.bustamante@fd.pharr-tx.gov	Fax Number:	
Organization/Agency: Pharr Fire Department	LEPC Membership Category: FD	
Address: 120 W Cherokee Ave		
City: Pharr	State: TX	Zip Code: 78577

Please provide a point-of-contact in the event there are questions about the information contained on these forms. Thank you.

<b>Box 4: LEPC Point of Contact</b>		
Contact Name: Jesus Diaz	Email: <a href="mailto:jesus.diaz@co.hidalgo.tx.us">jesus.diaz@co.hidalgo.tx.us</a>	Phone Number: 956-457-1080

## LEPC Member Updates

Reproduce this page if necessary.

Boxes 1-4 on the first page must be completed when submitting member updates.

Salutation: <b>Dr.</b>	First Name: <b>Carlos</b>	Last Name: <b>Palacio</b>
Job Title: <b>Trauma Surgeon</b>		Phone: <b>832-433-5449</b>
Contact Email: <b>chplmd@gmail.com</b>	Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Organization/Agency: <b>SouthTexas Health Systems</b>		LEPC Membership Category: <b>HOS</b>
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previous member's name:		
Salutation: <b>Mr</b>	First Name: <b>Jesus</b>	Last Name: <b>Diaz</b>
Job Title: <b>Deputy EMC</b>		Phone: <b>956-457-1080</b>
Contact Email: <b>jesus.diaz@co.hidalgo.tx.us</b>	Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Organization/Agency: <b>Hidalgo County Emergency Management</b>		LEPC Membership Category: <b>EM</b>
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previous member's name:		
Salutation: <b>Mr.</b>	First Name: <b>Adrian</b>	Last Name: <b>Garcia</b>
Job Title: <b>Fire Chief</b>		Phone: <b>956-929-8707</b>
Contact Email: <b>algarcia@missiontexas.us</b>	Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Organization/Agency: <b>Mission Fire Dept</b>		LEPC Membership Category: <b>FD</b>
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previous member's name:		
Salutation: <b>Mr.</b>	First Name: <b>Luis</b>	Last Name: <b>Lopez</b>
Job Title: <b>Police Captain</b>		Phone: <b>956-451-1595</b>
Contact Email: <b>l.lopez11@lajoyaisd.net</b>	Is this person a new member? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Organization/Agency: <b>La Joya ISD</b>		LEPC Membership Category: <b>ISD</b>
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previous member's name:		
Salutation: <b>Ms.</b>	First Name: <b>Diana</b>	Last Name: <b>Cortes</b>
Job Title: <b>Public Health Preparedness Coordinator</b>		Phone: <b>956-843-2659</b>
Contact Email: <b>diana.cortes@hchd.org</b>	Is this person a new member? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Organization/Agency: <b>Hidalgo County Health Dept</b>		LEPC Membership Category: <b>HD</b>
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previous member's name:		
Salutation: <b>Mr.</b>	First Name: <b>David</b>	Last Name: <b>Flores</b>
Job Title: <b>EMC</b>		Phone: <b>956-432-9369</b>
Contact Email: <b>dflores@missiontexas.us</b>	Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Organization/Agency: <b>City of Mission</b>		LEPC Membership Category: <b>EM</b>
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previous member's name:		