



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



Boxes 1-4 MUST be completed when submitted

Box 1:	
<i>Box 1 MUST be filled in and SIGNED 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

Box 2: Chairperson Update Information		
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 Dawes Ave		
City: Alton	State: TX	Zip Code: 78573

Box 3: Vice Chairperson Update Information		
Salutation: Mr.	First Name: Pedro	Last Name: Bustamante
Job Title: Deputy Chief		Phone: 956-292-8475
Contact Email: pedro.bustamante@fd.pharr-tx.gov		Fax Number:
Organization/Agency: Pharr Fire Department		LEPC Membership Category: FD
Address: 201 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.

Box 4: LEPC Point of Contact		
Contact Name: Alan Alvarez	Email: alan.alvarez@co.hidalgo.tx.us	Phone Number: 956-713-2904

LEPC Member Updates

Reproduce this page if necessary.

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

Salutation: Dr.	First Name: Carlos	Last Name: Palacio
Job Title: Trauma Surgeon		Phone: 832-433-5449
Contact Email: chplmd@gmail.com		Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Organization/Agency: South Texas Health Systems		LEPC Membership Category: HOS
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previous member's name:
Salutation: Mr.	First Name: Alan	Last Name: Alvarez
Job Title: Deputy EMC		Phone: 956-713-2904
Contact Email: alan.alvarez@co.hidalgo.tx.us		Is this person a new member? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Organization/Agency: Hidalgo County Emergency Management		LEPC Membership Category: EM
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previous member's name:
Salutation: Mr.	First Name: Jesse	Last Name: Diaz
Job Title: Deputy Fire Marshal		Phone: 956-929-8707
Contact Email: jesus.diaz@co.hidalgo.tx.us		Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Organization/Agency: Hidalgo County Fire Marshal's Office		LEPC Membership Category: FD
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previous member's name:
Salutation: Ms.	First Name: Diana	Last Name: Cortes
Job Title: Public Health Preparedness Coordinator		Phone: 956-843-2659
Contact Email: diana.cortes@hchd.org		Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Organization/Agency: Hidalgo County Health Department		LEPC Membership Category: HD
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previous member's name:
Salutation: Mr.	First Name: Miguel	Last Name: Guerra
Job Title: Assistant EMC		Phone: 956-681-2626
Contact Email: miguel.guerra@mcallen.net		Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Organization/Agency: City of McAllen		LEPC Membership Category: EM
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previous member's name:
Salutation: Mr.	First Name: Leonard	Last Name: Dahlberg
Job Title: Captain		Phone: 9556-681-2527
Contact Email: ldahlberg@mcallen.net		Is this person a new member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Organization/Agency: McAllen Fire Department		LEPC Membership Category: FD
Did this person replace a previous member? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Previous member's name: