

Emergency Services District (ESD) Reporting Form Jan. 1, 2020

Information received from this form will be transmitted to the Texas Division of Emergency Management in satisfaction of reporting requirements under Chapter 775 of the Health and Safety Code. This form is for the report required for Jan. 1, 2020.

Please familiarize yourself with the form before you begin submitting answers, because there is no mechanism to save the form and return later.

ESD Name (i.e., Buffalo County ESD No. 99) *

Fort Bend County ESD No. 4

County or Counties in Which ESD is Located *

Fort Bend

ESD Business Address *

30626 Fifth Street

Street Address

PO Box 494

Street Address Line 2

Fulshear

City

Texas

State / Province

77441

Postal / Zip Code

United States

Country

ESD email *

ESD phone *

<input type="text" value="281"/>	-	<input type="text" value="533-0095"/>
Area Code		Phone Number

ESD website

Type of ESD *

- Fire
- Emergency Medical Service
- Both

Annual ESD Budget *

Tax rate (most recently adopted; i.e., \$0.10/\$100) *

Population of ESD

Area (sq. miles) of ESD

Does your ESD collect a sales tax?

- Yes
- No

If your ESD collects a sales tax, what is the rate of the sales tax? (i.e. 1/2 percent)

Name of Person Completing this Form *

Brandi Crone
First Name Last Name

E-mail *

bcrone@fbcesd4.org

Phone Number *

281 533-0095
Area Code Phone Number

Name of ESD President (Commissioner No. 1) *

Daniel McJunkin
First Name Last Name

E-mail *

dmcjunkin@fbcesd4.org

Term Expires (example: 12/31/20) *

12/31/19

Name of ESD Vice President (Commissioner No. 2) *

Ed Krenek
First Name Last Name

E-mail *

Term Expires (example: 12/31/19) *

Name of ESD Secretary (Commissioner No. 3) *

Kim Stacy
First Name Last Name

E-mail *

Term Expires (example: 12/31/19) *

Name of ESD Treasurer (Commissioner No. 4) *

Brent Warren
First Name Last Name

E-mail *

Term Expires (example: 12/31/19) *

Name of ESD Commissioner (Commissioner No. 5) *

<input type="text" value="Tommy"/>	<input type="text" value="Kuykendall"/>
First Name	Last Name

E-mail *

Term Expires (example: 12/31/19) *

Name of ESD's legal counsel *

<input type="text" value="Regina"/>	<input type="text" value="Adams"/>
First Name	Last Name

Address

Street Address
Street Address Line 2

<input type="text" value="Houston"/>	<input type="text" value="Texas"/>
City	State / Province

<input type="text" value="77019"/>	<input style="border: 1px solid black; border-bottom: none; padding: 2px 5px;" type="text" value="United States"/> <input type="button" value="v"/>
Postal / Zip Code	Country

Phone Number

<input type="text" value="713"/>	<input type="text" value="237-1221"/>
Area Code	Phone Number

E-mail *

radams@rbaplaws.com

Name of ESD's general manager, executive director or administrator (N/A if none)

Brandi Crone
First Name Last Name

E-mail

bcrone@fbcesd4.org

Name of fire chief or EMS CEO

Gilbert Meier, Jr.
First Name Last Name

E-mail

chief@fsfd.org

Names of Other Consultant

Natalie Ridley
First Name Last Name

Service provided (i.e. audit)

Audit

E-mail

nridley@breedlovecpa.com

Names of Other Consultant

Kaye Townley

First Name Last Name

Service provided (i.e. audit)

Bookkeeper

E-mail

ktownley@municipalaccou

Question or comment

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