

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) *

Bexar County ESD 5

County or Counties in Which ESD is Located *

Bexar

ESD Business Address *

7120 E. 6th Street

Street Address

Street Address Line 2

Somerset

City

Texas

State / Province

78069

Postal / Zip Code

United States

Country

ESD email *

admin@bcesd5.com

12/10/2020

ESD phone *

830 - 429-7119

ESD website

bexarcountrysds.com

Type of ESD *

- Fire
- Emergency Medical Service
- Both

Annual ESD Budget *

1,500,000.

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

.10

Population of ESD

Area (sq. miles) of ESD

325

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)

1 1/2

Name of Person Completing this Form *

Sheila	Staggs
First Name	Last Name

E-mail *

sheila.staggs@bcesd5.com

Phone Number *

210	8898149
Area Code	Phone Number

Name of ESD President (Commissioner No. 1) *

Herschel	Postert
First Name	Last Name

E-mail *

herschel.postert@bcesd5.com

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

12/31/2011

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

Howard Dalros

First Name Last Name

E-mail *

chieftid@swbell.net

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

12/31/2016

Name of ESD Secretary (Commissioner No. 3) *

Robert Pierce

First Name Last Name

E-mail *

r13250p@prodigy.net

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

12/31/2020

Name of ESD Treasurer (Commissioner No. 4) *

Becky Schneider

First Name Last Name

E-mail *

becky.schneider@bcesd5.com

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

12/31/2018

Name of ESD Commissioner (Commissioner No. 5) *

Andrew	Flores
First Name	Last Name

E-mail *

andrew.flores@bcesd5.com

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

12/30/2015

Name of ESD's legal counsel *

Woody	Wilson
First Name	Last Name

Address

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Street Address

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Street Address Line 2

San Antonio

City

Texas

State / Province

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Postal / Zip Code

United States	▼
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Country

Phone Number

210

Area Code

222-8899

Phone Number

E-mail *

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

E-mail

Name of fire chief or EMS CEO

First Name

Last Name

E-mail

Names of Other Consultant

First Name

Last Name

Service provided (i.e. audit)

E-mail

Names of Other Consultant

<input type="text"/>	<input type="text"/>
First Name	Last Name

Service provided (i.e. audit)

E-mail

Question or comment

Submit Form

