



El Paso County Commissioners Court

Dear Applicant,

Thank you for your interest in applying to serve as a member of the El Paso County Emergency Service District #2. This packet provides the necessary information for you to familiarize yourself with the responsibilities of this board and the necessary documents to begin the application process.

We appreciate your willingness to be involved in guiding the future of this board and its function of ensuring the health and vitality of our community.

As a member of this board, you will be expected to participate in the meetings and other tasks as deemed necessary to fulfill your post. You should participate actively in meetings and seeking as much information needed to help the board come to its decisions. Please be aware of the various duties, responsibilities and the time commitment that will be required of you.

After submitting this application, it will be reviewed and if it meets the qualifications needed to fill the vacancy, your information will be submitted for approval by the El Paso Commissioners Court.

If you have any further questions, please feel free contact the County Administration office at (915) 546-2215. Again, thank you for your leadership and commitment.



El Paso County

Emergency Service District Board #2

Board Overview

The governing statute for an ESD is Chapter 775 of the Texas Health and Safety Code. An ESD is a local government agency created by a vote of the public to provide fire protection, and/or emergency medical services.

El Paso County Emergency Service District #2 (E.S.D. #2) protects and serves the citizens of El Paso County by providing fire protection, emergency services, conduct business inspections, perform cause and origin fire investigations, and cite and arrest, if necessary. The serviced areas for ESD#2 include Anthony, Canutillo, Clint, Fabens, Montana Vista, San Elizario, Socorro, Tornillo, Vinton, and unincorporated areas within the district. All ESD staff is directly led by the Fire Chief who reports directly to the board.

Board Duties

Sec. 775.036. POWERS AND DUTIES OF BOARD.

(a) The board shall:

- (1) hold regular monthly meetings and other meetings as necessary;
- (2) keep minutes and records of its acts and proceedings;
- (3) give reports required by the state fire marshal, commissioner of health, and other authorized persons;
- (4) on a written request from the commissioners court of a county in which the district is located received on or before December 31, give a written report not later than February 1 of the following year to the commissioners court regarding the district's budget, tax rate, and debt service for the preceding fiscal year; and
- (5) administer the district in accordance with this chapter.

(b) The board may adopt and enforce a fire code, including fines for any violations, that does not conflict with a fire code adopted by any county that also contains within its boundaries any portion of the land contained in the district and may require inspections in the district relating to the causes and prevention of fires and medical emergencies, except as provided by Section 775.031(b). The fire code must be similar to standards adopted by a nationally recognized standards-making association. The board may not enforce the district's fire code within the boundaries of a municipality that has adopted a fire code, except for an area that has been annexed only for limited purposes in which the municipality does not enforce a fire code. The board of a district located wholly within a county with a population of three million or more may not adopt a fire code or a fine for a violation of the district's fire code unless the commissioners court of the county consents to the adoption of the code or fine.

(b-1) If a county that contains within its boundaries any portion of the land contained in the district adopts a fire code after the district adopts a code under Subsection (b), the board may continue to enforce its fire code in the area subject to the county fire code. To the extent of any conflict between the county's code and the district's code, the more stringent provision prevails.

(c) The board may promote educational programs it considers proper to help carry out the purposes of this chapter.

Board Member Qualifications

To serve as a member of the board a person must be:

- At least 18 years of age; **and**
- A resident citizen of the state **and**;
 - a) A qualified voter within areas served by the district; **or**
 - b) The owner of land subject to taxation in the district.

Seats

The Board is a five-member body.

Term

Each member of the board is appointed by Commissioners Court for a 2-year term.

Meeting

The board meets on the 3rd Tuesday of every month at 6pm at 16001 Socorro Road, Fabens, Texas 79838.

Submit Application & Background Investigation authorization
form to the El Paso County Administration Department at:

500 E. San Antonio, Suite 302
El Paso, TX 79901
Phone: (915) 546-2215
Fax: (915) 546-2217
Email: countychiefadmin@epcounty.com



El Paso County

ESD#2 Application

Name: _____ Voting Precinct: _____

Home Address:

STREET

CITY

STATE

ZIP

Phone number: _____ Cell Phone number: _____

E-mail address: _____

PURSUANT TO TEXAS GOVERNMENT CODE, SEC. 522.021. I ELECT THAT MY HOME ADDRESS & TELEPHONE NUMBER (CHECK ONE): MAY BE RELEASED / SHALL NOT BE RELEASED TO THE PUBLIC UPON REQUEST UNDER THE TEXAS OPEN RECORDS ACT. FAILURE TO MAKE A DESIGNATION RESULTS IN INFORMATION BEING AVAILABLE FOR PUBLIC ACCESS.

Place of Employment: _____

Business Address: _____

STREET

CITY

STATE

ZIP

Telephone: () _____ Fax Number: () _____

Professional Background:

Educational Background:

Three (3) personal or professional references not related to you:

NAME _____ PHONE # _____ YEARS KNOWN _____

NAME _____ PHONE # _____ YEARS KNOWN _____

NAME _____ PHONE # _____ YEARS KNOWN _____

Previous volunteer organizations and/or community service:

Are you at least 18 years of age? _____(Yes)_____ (No)

Length of Residency in El Paso County: _____(Years/Months)

Are you a qualified voter within areas served by the ESD#2 district? _____(Yes)_____ (No)

Do you have property in El Paso County under your name? _____(Yes)_____ (No)

Are your property taxes currently paid? _____(Yes)_____ (No) If not, please give a brief explanation:

Are you an elected officer, county employee, county affiliate, or employed as a lobbyist? _____(Yes)_____ (No)

If so, please specify. _____

In accordance with the El Paso County Uniform Rules and Procedures, I _____ agree to complete 3 mandatory trainings: the County's Code of Ethics, Open Meetings Act, and Public Information Act upon accepting a board appointment. Additionally, if after the expiration of my term served and if being considered for reappointment, I also agree to retake the same trainings and any other training(s) identified by El Paso County if necessary.

Signature: _____

Date: _____

Application should be submitted to:

500 E. San Antonio, Suite 302
El Paso, TX 79901
Phone: (915) 546-2215
Fax: (915) 546-2217 or via email
Email: countychiefadmin@epcounty.com



BACKGROUND INVESTIGATION AUTHORIZATION FORM
RELEASE OF CONFIDENTIAL INFORMATION

Dear Applicant:

The County of El Paso conducts background investigations on applicants in various departments. This effort is part of the selection process and requires your authorization. By signing this document, you acknowledge that you are voluntarily granting permission to the County of El Paso to conduct a background check and you authorize relevant parties to release confidential information. The information will remain confidential and will not be disclosed.

I, _____ further hereby authorize the County of El Paso Human Resources Department to obtain all confidential records and information pertaining to a complete background investigation. This may include items such as (but not limited to): personal references, work references, Police Records, Sheriff Records, Driving Record, and any open record request.

_____	_____
Full Legal Name	Maiden Name (If Applicable)
_____	_____
Street Address	City/State/Zip Code
_____	_____
Social Security Number	Driver's License Number/State
_____	_____
Date of Birth	Email

List the cities and states in which you have lived in the past 10 years.

1. _____
2. _____
3. _____

4. _____
5. _____
6. _____

Signature of Applicant