



**Williamson County Emergency Services District No. 5**  
**Jarrell Fire Dept.**  
**P.O. Box 88 Jarrell, Texas 76537**  
*"Serving Northern Williamson County, Texas"*

**REQUEST FOR PUBLIC INFORMATION**

Name:

Address:

City/State/Zip:

Pursuant to the Texas Public Information Act, Chapter 552 of the Texas Government Code as amended, application is hereby made to the custodian of information for Williamson County Emergency Services District No.5, to produce for inspection or duplication or both, the following item(s):

Reports with relation to:

Building Fire

Vehicle Fire/Collision

Medical  
(HIPPA Regulated)

Other

At (location)

Street Number

Name of Street

(If at intersection, indicate both street names)

Run Number

Date Occurred (Mo-Day-Yr)

Time

Other Additional Information:

I would like a copy of the requested information.

I will pick up the copies. Please contact me at \_\_\_\_\_ when they are ready.

Please bill me and mail the copies to \_\_\_\_\_  
I understand that postage will be added to the charge of the report.

I do not want copies, but would like to inspect the requested information. Please contact me at \_\_\_\_\_ to schedule a time when the records will be available.

I understand that the information will be released only in accordance with the Public Information Act, which may require a determination as to confidentiality by the Texas Attorney General prior to a release. I further understand that Williamson County Emergency Services District No. 5 has 10 business days in which to request such determination.

Date

Requestor's Signature

Requestor's Name