



City Hall

City of Coatesville
www.coatesville.org

(610) 384-0300
FAX (610) 384-3612

CABLE CHANNEL 66 REQUEST FORM

Date: _____

Name: _____

Company: _____

Address: _____

City _____ State _____ Zip Code _____

Phone: _____ Fax: _____ Email _____

Message to be displayed: **(75 characters maximum)**

Start Date: _____

Finish Date: _____

Approved by: (print name) _____ Date: _____

Title _____

Please fax the request form to Ruthann Russell at 610-384-3612.

If you have questions or problems, please call Ruthann at 610-384-0300 ext. 3175 or email her at admin@coatesville.org.

Each request will be followed with a confirmation back to you.

*** Please send the request form five (5) business days prior to the start date of the advertisement.**

FOR INHOUSE USE ONLY

Approved _____

Date: _____

Confirmation sent by _____ Email _____ Fax _____ Phone _____

Date: _____