



Service Order Form 1/2

Orgar	nisation Delegation Pavilion						
Full address details							
Internal order number of client							
> #:	Name						
Primary contact	Telephone/Mobile						
<u> </u>	E-mail						
ary :t	Name						
Secondary contact	Telephone/Mobile						
S S	E-mail						
	Type of Service Air Freight Sea Freight Trucking					Misc	
	Dangerous goods	Yes		No			
	HS Code						
	ems to be received by Rhenus ivered to the venue of COP29	Weight of items in kg					
	Dimensions of items in cm		length		width		height
Brie	ef description of the contents						





Service Order Form 2/2

Zone at COP29	BLUE ZONE	GREEN Zone
Office/Pavilion/Booth at venue		
Requested delivery date at venue		
Re-Export needed	Yes No	
Requested starting date for re-export from venue		
Additional services during or post the event needed	Yes No	
Date for additional services		
Specify the additional services		