AIRPORT EMERGENCY SERVICE

FIRE SAFETY CIRCULAR

To All Staff working in CAB “E”

CAB “E” Fire Evacuation Drill

Changi Airport Group (Singapore) Pte Ltd will be conducting a Fire Evacuation Exercise on 10 December 2014 (Wednesday), 1000hrs at CAB “E”. In the event of inclement weather, the drill will be held between 1500-1600 hrs. A table top exercise and fire warden briefing is scheduled on 09 December 2014 (Tuesday) from 1500hrs to 1600hrs at CAB “E” Meeting Room # 05-11.

2. A pre-recorded announcement on the fire evacuation exercise will be broadcasted via the Public Announcement (PA) system to avoid panic and confusion for all.

3. Please note this annual fire evacuation exercise is a statutory requirement under the Fire Safety Act. For further clarification on the exercise, please contact AES Fire Prevention Section at 65412535 or at fire.safety@changiairport.com.

4. Attached are the assembly areas to be used for this exercise (Annex A – Assembly Areas at CAB “E”) and the floor register (Annex B). Appointed fire wardens / assistant fire warden shall update their floor registers (Annex B) and return the hard copies to AES Officers at the assembly areas during the exercise after a headcount has been conducted.

5. Please disseminate the content of this circular to all staff concerned.

WONG KIA HAN
for DEPUTY SUPERINTENDENT, FIRE PREVENTION
AIRPORT EMERGENCY SERVICE
Annex A – Assembly Areas at CAB “E”

E1: Open carpark north of CAB “E”

E2: Roadway outside CAB “E” main entrance
Annex B – Floor Register

TO: Changi Airport Group  
    Airport Emergency Service  
    P O Box 168  
    Singapore Changi Airport  
    Singapore 918146

FLOOR REGISTER

Tenant / Company Name: __________________________________________________________

Floor Level: ______________________    Unit/Room No: ________________________  
(Please use a separate form for each level)

Telephone & Fax No. _________________________/____________________________

Name of Fire Warden & Contact No: _________________________________________

Name of Assistant Fire Warden & Contact No: _________________________________

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Submitted by: __________________________________________________________  
Name & Designation

Signature & Date: ________________________________