AIRPORT EMERGENCY SERVICE

FIRE PREVENTION CIRCULAR

To All Staff working in Megaplex 1

Megaplex 1 Fire Evacuation Exercise

Changi Airport Group (Singapore) Pte Ltd will be conducting a Fire Evacuation Exercise on 28 May 2015 (Thursday), 1000hrs at Megaplex 1. 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 27 May 2015 (Wednesday) from 1500hrs to 1600hrs at Megaplex 1 Meeting Room # 05-06.

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 Megaplex 1 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.

SHER AKBAR KHAN
for DEPUTY SUPERINTENDENT, FIRE PREVENTION
AIRPORT EMERGENCY SERVICE
Annex A – Assembly Areas at Megaplex 1

B1: Open space at the western side of Megaplex 1

B2: Open space at the eastern side of Megaplex 1
Annex B – Floor Register (Megaplex 1)

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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<th>Name of Occupants / Staff</th>
<th>Evacuation Status (for official use during emergency)</th>
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Submitted by: ____________________________________________________________

Name & Designation

Signature & Date: ____________________________