

# Franchise Safety Contact Information Amendment

Date: [Insert Date]

[Franchisee Name]

[Franchisee Address]

[City, State, Zip Code]

Dear [Franchisee Name],

This letter serves as a formal notification regarding the amendment of safety contact information for your franchise located at [Franchise Location]. In order to ensure compliance with local safety regulations and enhance communication efficiency, we request the following updates:

## Updated Safety Contact Information

**Primary Safety Contact:** [New Contact Name]

**Contact Phone Number:** [New Phone Number]

**Email Address:** [New Email Address]

Please provide the updated information by [Deadline Date] to ensure that we can keep our safety protocols current and effective. Should you have any questions or require further clarification, do not hesitate to reach out to us at [Your Phone Number] or [Your Email Address].

Thank you for your prompt attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Your Company]

[Company Address]

[City, State, Zip Code]