

# Fleet Maintenance Schedule Confirmation

Date: [Insert Date]

To: [Recipient Name]

From: [Your Name]

Subject: Confirmation of Fleet Maintenance Schedule for Vehicle Safety Assessments

Dear [Recipient Name],

We are writing to confirm the scheduled maintenance for our fleet vehicles as part of our ongoing commitment to safety and compliance. The following assessments will be conducted:

- **Vehicle ID:** [Vehicle ID]
- **Maintenance Date:** [Insert Date]
- **Location:** [Insert Location]
- **Time:** [Insert Time]

Please ensure that all necessary preparations are made to facilitate a thorough safety assessment. If you have any questions or need further adjustments to the schedule, do not hesitate to reach out.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Job Title]

[Your Company Name]

[Your Contact Information]