

Emergency Contact Information for Drivers

Date: _____

To: All Drivers

From: [Company Name]

Subject: Transport Emergency Contact Information

Dear Drivers,

In case of an emergency during transport operations, please have the following contact information readily available:

Emergency Contacts

- **Company Emergency Contact:** [Name], [Phone Number], [Email]
- **Safety Manager:** [Name], [Phone Number], [Email]
- **Local Authorities:** Emergency Services - Dial 911
- **Towing Services:** [Towing Company Name], [Phone Number]

Please remember to keep your mobile phone charged and accessible at all times while on duty.

Thank you for your attention to this important matter.

Sincerely,

[Your Name]

[Your Position]

[Company Name]