

Vehicle Asset Inventory Assessment

Date: [Insert Date]

To: [Recipient Name]

[Recipient Title]

[Company Name]

[Company Address]

[City, State, ZIP Code]

Dear [Recipient Name],

We are conducting a comprehensive vehicle asset inventory assessment as part of our ongoing efforts to optimize fleet management and ensure accurate record-keeping. This assessment will help us evaluate the current status and utilization of our vehicle assets.

Assessment Details

- **Assessment Date:** [Insert Assessment Date]
- **Location:** [Insert Location]
- **Team Lead:** [Insert Team Lead Name]

Information Required

Please provide the following details for each vehicle:

- Vehicle Make and Model
- Vehicle Identification Number (VIN)
- License Plate Number
- Purchase Date
- Current Condition
- Current Mileage

Your cooperation in providing this information by [Insert Deadline Date] would be greatly appreciated. If you have any questions or need further clarification, please do not hesitate to reach out.

Thank you for your attention to this important matter.

Sincerely,

[Your Name]

[Your Title]

[Your Company]

[Your Contact Information]