Hygiene Practices Audit Notification

| Date: [Insert Date] |
|--|
| [Recipient Name] |
| [Recipient Title] |
| [Company/Organization Name] |
| [Address] |
| Dear [Recipient Name], |
| We are writing to notify you of the upcoming hygiene practices audit scheduled for [insert date]. This audit is part of our ongoing commitment to maintaining high standards of health and safety within our organization. |
| The objectives of the hygiene practices audit are to: |
| Evaluate the current hygiene practices in place. Identify areas for improvement. Ensure compliance with industry regulations. |
| During the audit, we will review the following areas: |
| Personal hygiene of staff Sanitation of facilities Cleaning protocols Waste management practices |
| We appreciate your cooperation in this matter and your commitment to ensuring the highest standards of hygiene. Please feel free to reach out if you have any questions or require further information. |
| Thank you for your attention to this important matter. |
| Sincerely, |
| [Your Name] |
| [Your Title] |
| [Your Company/Organization] |

[Contact Information]