

[Company Letterhead/Logo]

[Date]

[Principal Contractor Name]

[Project Name/Site Address]

[City, State, Zip Code]

**Subject: Contractor Site-Specific Health and Safety Induction Verification**

To whom it may concern,

This letter serves to verify that the employees listed below, employed by [**Contracting Company Name**], have successfully completed the Site-Specific Health and Safety Induction for the project located at [**Site Address**].

The induction was conducted on [**Date of Induction**] and covered the following topics:

- Site-specific hazards and risk controls
- Emergency procedures and assembly points
- Location of first aid facilities and incident reporting protocols
- Required Personal Protective Equipment (PPE)
- Site rules, restricted areas, and permit-to-work requirements

**Inducted Personnel:**

<b>Full Name</b>	<b>Job Title/Trade</b>	<b>Employee ID/License No.</b>
[Name 1]	[Title 1]	[ID 1]
[Name 2]	[Title 2]	[ID 2]

We confirm that these individuals have been briefed on their responsibilities under the Health and Safety management plan and have agreed to comply with all site safety regulations.

Sincerely,

[Signature]

[Name of Safety Officer/Manager]

[Title]

[Company Name]

[Phone Number]