**[Print on Employer’s Letterhead or insert Company Name and Address]**

<<Employee's Name>>

<<Address>>

<<Address>>

<<Post Code>>

<<Date>>

Dear << >>

**Re: Suspension – Health and Safety**

I am writing to inform you of your suspension from work to avoid the danger of exposure to hazardous substances which might otherwise damage your health. We owe our employees a duty of care for their health and safety while they are at work. As such, this suspension is a neutral act to safeguard your health.

You will be suspended for no more than <<5>> working days while this matter is being investigated. If it is not possible to resolve this within <<5>> working days, the suspension period will last for as long as it takes for this matter to be resolved. During your suspension you shall receive your pay and benefits in accordance with your terms and conditions of employment.

During your suspension, you must:

* + 1. Return your office keys/swipe card to <<name>>
		2. Provide details of your computer password to <<IT Manager>>
		3. Comply with any reasonable conditions the Company may specify regarding your attending or staying away from the Company’s premises
		4. Be available for work during your normal working hours
		5. Refrain from performing work for any other employer or for yourself (self employment) during your normal working hours
		6. Let the Company know if you fall ill or are incapacitated. If this occurs, please provide appropriate evidence of incapacity in accordance with the sickness absence provisions in your contract of employment.
		7. Apply for annual leave as per the holiday provisions in your contract of employment

If you have any questions please do not hesitate to contact me.

Yours sincerely

**<<Name & Title>>**

For and on behalf of <<Company Name>>