

**Date:** [Insert Date]

**To:** [Supervisor Name / Human Resources Department]

**From:** [Employee Name]

**Subject:** Return to Work with Restrictions - Hazardous Cleaning Solvents

Dear [Name],

This letter serves as formal notification that I am cleared to return to work effective [Date].

Based on medical evaluation and safety requirements, my return is subject to the following restriction regarding hazardous cleaning solvents:

- **Restriction:** No direct contact with, or exposure to, [Specific Solvent Name or "Hazardous Cleaning Solvents"].
- **Duration:** [Insert Duration, e.g., Permanent / Until Date].
- **Required Accommodations:** [Insert requirement, e.g., Use of non-toxic alternatives / Assignment to a solvent-free workstation / Enhanced PPE usage].

I am eager to resume my duties and am available to discuss how these restrictions can be accommodated within my current role. Please find the attached documentation from my healthcare provider detailing these requirements.

Thank you for your cooperation in ensuring a safe working environment.

Sincerely,

[Employee Signature]

[Employee Printed Name]

[Employee ID Number]