**To Whomsoever It May Concern**

Place: Date:

This is to certify that Mr./Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(driver’s name) worked as a  \_\_\_\_\_\_\_(LMV/HGMV/HPMV/LDRXCV) Driver in \_\_\_\_\_\_\_\_\_\_\_\_\_(Department) in our organization from \_\_\_\_\_\_\_\_\_(date) to \_\_\_\_\_\_\_\_\_(date).

During his tenure, we found him/her sincere and hardworking.

We wish you all the best in his/her future endeavours.

For the Company Name,

Authorized Signatory.