

Non-Smokers' Rights Association Smoking and Health Action Foundation

No-Smoking Policy Tenant Survey

The purpose of this survey is to assess the level of interest amongst tenants in having the choice to live in a smoke-free environment.

1. I have noticed the smell of second-hand smoke in the hallway.
 Yes No
2. I have noticed the smell of second-hand smoke in my apartment.
 Yes No
3. I have health problems made worse by exposure to second-hand smoke.
 Yes No
4. I feel that exposure to second-hand smoke is harmful.
 Yes No
5. I currently allow smoking in my own apartment.
 Yes No
6. I am a smoker.
 Yes No
7. I would be interested in living in a building where smoking was partially or completely banned, including private units.
 Yes No
8. If you answered yes to question #7, please choose one of the following:
 - a. I would be interested in having smoking banned on a wing or floor, including private units.
 Yes No

b. I would be interested in having a complete smoking ban for the entire building, including all private units.

Yes

No

c. I would be interested in having a complete smoking ban for the entire building, including all private units, as well as having smoke-free buffer zones established around doorways, operable windows, and air intakes.

Yes

No

d. I would be interested in a complete smoking ban for the entire building and entire property.

Yes

No

Comments:

Optional:

Floor #:

Unit #:

(Where appropriate, this information could help to determine the best location for a partial no-smoking policy.)

Thank you for completing this survey—we value your input.