

# Sample Letter to Notify Tenants of Smoke-Free Building Policy

**[DATE]**

Dear Residents,

In order to provide a healthier environment for our residents and guests, our property has decided to go completely smoke free. The harmful effects of secondhand smoke and the fire dangers caused by smoking indoors are simply too great to ignore.

The common areas in your building are already smoke free in accordance with the Minnesota Clean Indoor Air Act (this includes hallways, exercise areas, laundry rooms, and enclosed garages). A smoke-free policy for all individual units will be phased in as leases are renewed.

## Hazards of Secondhand Smoke

Secondhand smoke is a serious health hazard. It is the third leading cause of preventable death in the United States, causing approximately 49,000 deaths each year. In 2003, 66,699 adults and children in Minnesota were treated for conditions caused by secondhand smoke, such as respiratory illness, asthma, lung cancer, and heart disease. The 2006 Surgeon General's report, "The Health Consequences of Involuntary Exposure to Tobacco Smoke," states that there is no risk-free level of exposure to secondhand smoke. Secondhand smoke is particularly dangerous to children and has been linked to childhood asthma, low birth weight, ear infections, and Sudden Infant Death Syndrome.

## Fire Risk

Smoking is the leading cause of fire death in the United States and in Minnesota. Fires can start on decks and porches as well as in units. According to the National Fire Protection Association's report "The Smoking-Materials Fire Problem," one in four (24%) victims who die in residential smoking-related fires is not the smoker whose cigarette started the fire. Fires caused by smoking are costly, deadly, and leave many people with damaged property and no place to live. We want to protect our residents from these dangers.

## Ventilation is not Effective

Research conducted during air movement studies have shown that secondhand smoke travels from unit to unit. The smoke can seep through electrical outlets, heating and duct work, and structural gaps. The remodeling required to prevent secondhand smoke from traveling to another residence can be costly and ineffective. The only effective way to stop the spread of secondhand smoke is by adopting a smoke-free policy.

## Our Building's New Smoke-Free Policy

Effective **[date for new tenants]**, all tenants signing new leases will be required to sign a smoke-free lease addendum that explains the policy. All current tenants will be required to sign a smoke-free lease addendum during their lease renewal process. We anticipate the transition to becoming a smoke-free building to be completed by **[date all tenants will have signed smoke-free lease addendum]**. The smoke-free policy will cover all individual units and all common areas **[if applicable, list other smoke-free places on property]**. All residents and guests will be required to follow this policy.

Please consider this letter as notice about the changes that will be taking place upon renewal of your lease. We hope this policy will help everyone breathe easier and live healthier.

Please have all adults living in your unit sign the enclosed form and return it to the management within one week. If you have any questions about this policy, please contact management.

Thank you,

Property Manager/Owner

**[DATE]**

All adults living in a unit must sign below and return to the management within one week. If this form is not signed and returned within one week, management will assume that residents have chosen not to adhere to the smoke-free policy and will begin the lease termination process.

**Adult #1**

I understand and agree to abide by the smoke-free policy to begin at my lease renewal.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Apartment Number: \_\_\_\_\_ Date: \_\_\_\_\_

**Adult #2**

I understand and agree to abide by the smoke-free policy to begin at my lease renewal.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Apartment Number: \_\_\_\_\_ Date: \_\_\_\_\_

**Adult #3**

I understand and agree to abide by the smoke-free policy to begin at my lease renewal.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Apartment Number: \_\_\_\_\_ Date: \_\_\_\_\_

**Adult #4**

I understand and agree to abide by the smoke-free policy to begin at my lease renewal.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Apartment Number: \_\_\_\_\_ Date: \_\_\_\_\_