**Sample Post-Policy Resident Survey***For Use by Public Housing Providers*

**[Date]**

Dear Residents,

To provide a safer, healthier community for residents and guests, **[building/property name]** recently went completely smoke free. This is because the United States Department of Housing and Urban Development (HUD) requires all public housing to have a smoke-free policy.

HUD created this rule for several reasons. Secondhand smoke, the smoke that is released from a lit cigarette or exhaled by a smoker, is harmful to your health. According to the US Surgeon General, there is no safe level of secondhand smoke exposure. Smoking can also cause property damage and extra cleaning costs, as well as lead to fire deaths and damage.

We would like to hear if the smoke-free policy at **[property/building name]** is successful! Please help us evaluate the smoke-free policy by filling out the short survey below and returning it to **[name of office, etc.]**.

Sincerely,

**[Apartment Manager’s name]**

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**Did you live in this building prior to [date policy went into effect], which is when it went smoke free? (Check all that apply)**

* Yes→ I could smell secondhand smoke in my apartment before the building went smoke free
* No→ The smoke-free policy was one of my reasons for moving into the building

**Can you currently smell cigarette smoke in your apartment even though the building is smoke free? (Check all that apply)**

* Yes →  The smoke smell bothers me and/or makes me ill
* No, I cannot smell secondhand smoke coming into my apartment

**Do you like living in a smoke-free building?**

* Yes  No  I have no preference

**Have you or anyone living in your apartment tried to quit or cut back on smoking since the building went smoke free? (Check all that apply)**

* Yes→ I or someone living in my apartment: quit smoking cut back on smoking
* No→ No one living in my apartment smokes

**Comments:  
  
Optional Information:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Apt #: \_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_