

SMOKE-FREE POLICY IMPLEMENTATION MATERIALS

ORDER FORM FOR MN MULTI-UNIT HOUSING PROPERTIES

	QUANTITY REQUESTED
SECONDHAND SMOKE & CESSATION INFORMATION (RESOURCES FOR RESIDENTS):	
☐ Conclusions from the 2006 Surgeon General's Report on the dangers of secondhand smoke	
☐ Information on Minnesota's free quit smoking programs	
MATERIALS AVAILABLE TO SMOKE-FREE MINNESOTA PROPERTIES:	
* A copy of your smoke-free policy is required for all of the following materials.	
RESIDENT REMINDERS: "WELCOME TO YOUR SMOKE-FREE HOME"	
□ Rubber keychain* □ Magnetic shopping list* * One type of resident reminder per property (ie. shopping list OR keychain); one per unit	
DOOR/WINDOW CLINGS: "WELCOME TO OUR SMOKE-FREE BUILDING"	
☐ English Language Only ☐ English/Spanish Language ☐ English/Hmong Language	
LAWN SIGN: "SMOKE-FREE APARTMENTS: NOW RENTING!"	
☐ Send me metal stands for the signs ☐ Do not send me sign stands	
INTERIOR DOOR PLAQUE: "For the health of all residents and guests, this building is 100% smoke free."	
OUTDOOR BUILDING AND PROPERTY SIGNS:	
☐ "100% Smoke-Free Building" (covers all indoor areas)	
☐ '100% Smoke-Free Building' includes Electronic Cigarettes*	
☐ "100% Smoke-Free Property" (covers all indoor & outdoor areas)	
☐ '100% Smoke-Free Property' includes Electronic Cigarettes*	
"No Smoking Beyond this Point" (designates the perimeter of a smoke-free area)	

^{* &#}x27;Electronic cigarettes' must specifically be mentioned in your policy to receive electronic cigarette signs.



Magnetic Notepad 3.5" X 6"



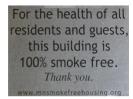
Rubber Key Chain



Window Cling 4.5" X 6.5"



Lawn Sign 18" X 24" plastic, two-sided



3.5" X 5"
metal, adhesive back

Outdoor Signs Metal - 12" X 18"











PROVIDE THE FOLLOWING INFORMATION TO RECEIVE YOUR FREE MATERIALS:

*Note: these materials are only available for Minnesota properties; allow 2-3 weeks for delivery.

SHIPPING INFORMATION:	
SHIPPING ADDRESS: SHIPPING CITY: PHONE:	STATE: ZIP: STATE:
PROPERTY INFORMATION	: (Include the following information for each smoke-free property where signs will be posted)
MANAGEMENT COMPANY: CONTACT NAME: STREET ADDRESS: CITY: PHONE:	TITLE:
TYPE OF BUILDING (Check a	ıll that apply)
☐ Town Home ☐ Senior Hot ☐ Condominium ☐ Market Ra	TOTAL NUMBER OF UNITS: INGS: NUMBER OF SMOKE-FREE UNITS:
SMOKE-FREE POLICY DETA	(Check all that apply)
	ů ,
To confirm that a property is smoke free, Live Smoke Free must receive a copy of the property's smoke-free policy before shipping your sign order.	RETURN FORM TO: Live Smoke Free *INTERNAL USE* Date Signs Sent:

Live Smoke Free reserves the right to limit an order based on the quantities of materials available.

☐ I have attached my smoke-free policy

To access this order form online, visit: http://www.mnsmokefreehousing.org/landlords/links.html

☐ I will send my smoke-free policy via mail, e-mail or fax

Live Smoke Free

2395 University Avenue W, Suite 310

St. Paul, MN 55114-1512

Email: info@mnsmokefreehousing.org

Phone: (651) 646-3005 **FAX:** (651) 646-0142

Date Signs Sent: Filled by: Policy Received? Policy Scanned?

Building in DB?

Sign order in DB?