



NOTICE OF SMOKING INCIDENT

BUILDING: _____ **DATE:** _____

RESIDENT: _____ **UNIT NO:** _____

This notice is to inform management of _____ of the following smoking-related incident: _____ (name or address of building)

Description of incident:

- ____ 1. Smoking coming into rental unit
- ____ 2. Smoking observed in indoor common area
- ____ 3. Smoking observed in outdoor area
- ____ 4. Other:

Remarks/Detailed Description:

Please submit this form to the rental office.

Tenant: _____ Date: _____