

# Smoke-Free Housing Policy

## Rosenberg Housing Authority

To insure quality of air and the safety of all housing choice voucher participants, pursuant to 24 CFR § 965, Subpart G, The Rosenberg Housing Authority has declared that buildings that the housing authority operates in are smoke-free. The following will apply:

1. All current applicants, all employees, all guests, and all participants are prohibited from smoking in offices where the Housing Authority operates, and participants are strongly encouraged to discontinue smoking within their assisted unit.
2. Smoking outside any building or apartment is allowed as long as it is 25 feet from the building or apartment.
3. Prohibited tobacco products include cigarettes, cigars, pipes and water pipes (hookahs)
4. All participants, employees and applicants are responsible for properly disposing of smoking product wrappings and residue, such as cigarette butts.
5. "No Smoking" signs will be posted on the office exterior door.
6. Evidence of a violation of this policy includes but is not limited to participant complaints, witness observation, and odor and/or evidence of tobacco paraphernalia observed during unit maintenance visits and inspections.
7. The housing authority will provide referrals to smoking cessation services for any current residents who smoke and wish to quit.
8. All participants receiving assistance from the Rosenberg Housing Authority and all employees shall sign the Smoke-Free Policy Certification for placement in the participant's or employee's file and a copy will be provided to him/her.
9. Any deviation from this Smoke-Free Housing Policy by any participant, household member, or their guest will be considered a violation of the Housing Choice Voucher Program.
10. Where possible and feasible, the housing authority will consider reasonable accommodation for disabled residents who smoke, e.g., transferring to a first floor unit.

## Resident Certification

\_\_\_\_\_  
Apartment Address

\_\_\_\_\_  
Unit No.

I certify that I have read the Smoke-Free Housing Policy and agree to fully abide by its provisions. I understand that participants are responsible for the actions of their household members, their guests and visitors. I understand that failure to adhere to any conditions of this policy will constitute a violation of the Housing Choice Voucher Program.

\_\_\_\_\_  
Head of Household (*signature*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse/Co-Head/Other Adult (*Signature*)

\_\_\_\_\_  
Date