

## Sample Letter

[your street address]  
[city, state zip code]  
[date (month, day, year)]

[name of apartment community]  
Attn: [name of property manager or owner]  
[street address]  
[city, state zip code]

Dear [name of property manager or owner],

I enjoy living at [name of apartment community] and want to continue living here because [insert the reasons you enjoy the community]. As much as I like this community, I am experiencing serious health issues due to tobacco smoke drifting into my apartment unit from an adjoining apartment unit. The situation has become intolerable for me and your assistance is requested to resolve the problem.

Secondhand smoke is a serious health hazard that can lead to disease and premature death. There is no safe level of exposure. Even brief exposure can be harmful to people's health. Secondhand smoke:

- exposes residents to over 7000 chemicals, about 70 of which are known to cause cancer in humans
- causes or worsens respiratory tract infections, such as pneumonia and bronchitis, especially in infants, children, and older adults
- can trigger a heart attack in people with pre-existing conditions

With these facts in mind, [name of apartment community] and the health of all residents would benefit from implementing a no-smoking policy. Below are some of the benefits to be gained:

- Attract more tenants. According to a 2012 survey of Maricopa County renters, 7 in 10 renters would choose to live in a smoke-free apartment community over one where management allows smoking.
- Save money by reducing the need for repairs. Smoke causes serious property damage.
- Eliminate the leading cause of residential fire deaths. Every year, fires caused by cigarette result in hundreds of millions of dollars in damages and are the leading cause of death nationally.
- Potentially reduce your insurance premiums. Some insurance companies may offer property owners and residents discounts on general liability insurance premiums if they implement a no-smoking policy. No-smoking rules reduce the risk of fires, injury and death.

I have experienced [add list of symptoms] for [add amount of time (i.e., weeks, months)] that my healthcare provider has confirmed are directly caused from exposure to tobacco smoke. Please see the attached letter from my healthcare provider for more details.

Given the seriousness and urgency of the situation, I am asking that you consider adopting a no-smoking policy at [name of apartment community]. Arizona Smoke-Free Living, a group that

can assist with planning and implementing no-smoking policies, is available to assist us in this matter, if needed.

I would appreciate a written response to this letter within 14 business days.

Thank you very much for your assistance on this important matter.

Sincerely,

[your name]