

Multi-unit Housing Owner/Manager Survey Questionnaire

Hello, my name is [INTERVIEWER NAME]. I'm calling from the Public Research Institute at San Francisco State University on behalf of the University of California, Los Angeles and the California Apartment Association for a California state study on smoking policy information for multi-unit housing. You are part of a random sample of CAA members selected to participate in the survey. Do you recall receiving a letter from the CAA about this survey?

IF YES:

Do you have any questions regarding the survey?

[ANSWER QUESTIONS FROM FACT SHEET]

IF NO:

The CAA, in cooperation with UCLA, selected a random panel of its members to participate in the survey and recently sent a letter to encourage CAA members to participate. The purpose of the survey is to estimate the costs incurred over the past year due to smoking-related damages on the entire property, and over the past five years in the most recently vacated unit. May I go ahead and interview you for this study?

- 1 CONTINUE
- 2 SCHEDULE CALLBACK (CORRECT PERSON)
- 3 SCHEDULE CALLBACK (WITH DIFFERENT PERSON)
- 4 HANG_UP (INITIAL REFUSAL)
- 5 HARD REFUSAL

IF CONTINUE:

The survey takes about 25 minutes on average. There are questions about the properties you own and/or manage, the costs generated by smoke-related damages to these properties, secondhand smoke problems at these properties, and about issues related to smoke-free policies in multi-unit housing. To thank you for your time, we will mail you a \$25 Target gift card after you complete the survey.

Participation in the survey is voluntary and confidential. Your answers will be used only for this study. You may withdraw at any time without any consequences. You may refuse to answer any questions you do not wish to answer and still remain in the study. All data collected will be stored in a password-protected database and only accessible by the study staff. Your name will not be associated with your responses and your contact information will be known only to authorized personnel. Your responses will be reported in aggregate only and reports and publications from the study will make no reference to specific individuals. Your interview may be recorded or monitored for quality control purposes.

The University has very strict safeguards to protect your confidentiality and your privacy. If you have questions about your rights as a participant you may contact the lead researcher in this study. Would you like the contact information?

IF YES:

You may contact Dr. Michael Ong at (310) 704-0154 if you have any questions about the study. You may also contact the Office for the Protection or Research Subjects, UCLA, 11000 Kinross Avenue, Suite 102, Box 951694, Los Angeles, CA 90095-1694 or at (310) 825-8714.

Would you like to continue with the survey?

IF YES: THANK AND CONTINUE

IF NO:

If another time is more convenient, we can schedule a better time. You may also complete the survey online.

- 1 CONTINUE
- 2 SCHEDULE CALLBACK FOR PHONE INTERVIEW
- 3 COMPLETE ONLINE
- 4 REFUSAL (DON'T CALL BACK)

IF CONTINUE:

Thank you for being willing to participate in the study. First I am going to ask you some questions about one of your properties.

S. SCREENING

S1. First we would like to ask you about your property with the most recently vacated unit. What is the address of that property?

INTERVIEWER CHECK:: PLEASE VERIFY SPELLING IF NECESSARY

ADDRESS: _____
CITY: _____
STATE: _____
ZIP CODE: _____
88 DON'T KNOW
99 REFUSED

S2. Do you make the key decisions about the day-to-day management decisions for the property with the most recently vacated unit? (MPAAT S1)

- 1 YES (SKIP TO S3)
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

IF "NO" TO S2:

TO SCHEDULE CALLBACK WITH SOMEONE OTHER THAN THE PERSON YOU ARE SPEAKING TO:

May I get the name of the person who is responsible for the day-to-day management and decision making for the most recently vacated property you just mentioned?

Name _____
Title _____
Phone _____
88 DOES NOT HAVE THE CONTACT INFORMATION
99 REFUSES

S3. Are you the ... ? (READ LIST; CHECK ONE) (POMS Q79)

- 1 Property Owner
- 2 Property Manager, or
- 3 Other Agent of the Owner?
- 88 DON'T KNOW
- 99 REFUSED

A. PERSONAL CHARACTERISTICS

Now I am going to ask you a few questions about yourself.

A1. What is your age?

 AGE
99 REFUSED

A2. Are you male or female?

1 MALE
2 FEMALE
99 REFUSED

A3. What race do you consider yourself to be? Are you... **(READ LIST; CHECK ALL THAT APPLY)**

1 White
2 Non-white Hispanic or Latino
3 African American or Black
4 Asian or Pacific Islander
5 Native American (American Indian) or Alaska Native, or
6 another race? (SPECIFY BELOW)
88 DON'T KNOW
99 REFUSED

A4. Have you smoked at least 100 cigarettes in your entire life?

[INTV: 1 PACK = 20 CIGARETTES] (CTS2)

1 YES
2 NO **(SKIP TO B1)**
88 ... DON'T KNOW
99 ... REFUSED

A5. Do you now smoke cigarettes every day, some days or not at all? (CTS2)

1 EVERYDAY
2 SOME DAYS
3 NOT AT ALL
88 DON'T KNOW
99 REFUSED

INTERVIEWER CHECK: STOP HERE, IF ANSWERED "NO" TO S2.

**TELL RESPONDENT WE WILL CONTACT THE OTHER PERSON TO COMPLETE THE INTERVIEW.
THANK THEM AND TERMINATE.**

INTERVIEWER CHECK: IF ANSWERED "YES" TO S2, ASK

B. PROPERTY CHARACTERISTICS

B1. How many residential buildings do you own or manage in California, not including single-family detached houses? If you own or manage complexes, please include all the multi-unit buildings in the complex. (MPAAT Q3, Rev)

 # OF BUILDINGS
88 DON'T KNOW
99 REFUSED

Now I have some questions about the characteristics of the particular property at THE ADDRESS OF THE PROPERTY

B2. Which of the following best describe the owner of this property?

Is it... **(READ LIST; CHECK ONE)** (POMS Q68A)

- 1 Individual investor, including joint ownership by two or more individuals, such as husband and wife,
- 2 Trustee for estate,
- 3 Limited partnership,
- 4 General partnership,
- 5 Joint venture,
- 6 Real Estate Investment Trust (REIT),
- 7 Real estate corporation,
- 8 Non-profit or church-related institution or labor union, or
- 9 another kind of institution? (SPECIFY BELOW)
- 88 DON'T KNOW (SKIP TO B4)
- 99 REFUSED (SKIP TO B4)

B3. And how many owners are there? (POMS Q68B)

_____ # OF OWNERS

- 88 DON'T KNOW
- 99 REFUSED

B4. Do any of the owners live at this property? (POMS Q74a, Rev)

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

B5. Is there an on-site manager living at this property?

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

B6. In the past twelve months, about how often did you visit this property?

Was it... **(READ LIST; CHECK ONE)** (POMS Q75, Rev)

- 1 Never or almost never,
- 2 Less than once a month,
- 3 About once a month,
- 4 About twice a month,
- 5 About once a week, or
- 6 More than once a week?
- 88 DON'T KNOW
- 99 REFUSED

Again, thinking only about this property

B7. In what year did the present owner acquire the property?

IF NECESSARY:

If the land was acquired before building on it, please report the year the building was built.) (POMS Q50)

_____ YEAR
 88 DON'T KNOW
 99 REFUSED

B8. How long has this property been under the current management? (POMS Q20C)

1 LESS THAN 1 YEAR
 2 1 UP TO 3 YEARS
 3 3 UP TO 5 YEARS
 4 5 YEARS OR MORE
 88 DON'T KNOW
 99 REFUSED

B9. How many buildings containing residential units are there at this property? (POMS Q13) **[INTV: RESP REPORTED OWNING <ANSWER TO B1> BUILDINGS]**

_____ BUILDINGS
 88 DON'T KNOW
 99 REFUSED

B10. How many buildings are ... (MPAAT Q5, Rev)
[INTV: NUMBER OF BUILDING ON THE PROPERTY IS <ANSWER TO B9>]

	NUMBER OF BUILDINGS	DON'T KNOW	REFUSE D
a. 2 to 4 unit buildings?	_____	88	99
b. 5 to 9 unit buildings?	_____	88	99
c. 10 units or more, but 3 stories or less?	_____	88	99
d. 10 units or more, but 4 to 6 stories?	_____	88	99
e. 10 units or more, but 7 stories or more?	_____	88	99

B11. And what is the total number of residential units on the property at [PROPERTY ADDRESS]? (MPAAT Q4)

[ANSWER SHOULD BE BETWEEN _____ AND _____]

_____ # OF UNITS
 88 DON'T KNOW
 99 REFUSED

B12. And how many units have been vacated at [PROPERTY ADDRESS] in the past 12 months? (POMS Q35)

_____ # OF UNITS
 88 DON'T KNOW
 99 REFUSED

B13. How many residential housing units at [PROPERTY ADDRESS] are currently... (POMS Q14)

	# UNITS	DON'T KNOW	REFUSED
a. Occupied?	_____	88	99
b. Vacant for rent?	_____	88	99
c. Vacant not available for rent?	_____	88	99

B14. And on the property at [PROPERTY ADDRESS] how many residential housing units are rented furnished?

Please do not include units that provide appliances only) (POMS Q15)

[TOTAL UNITS ON THE PROPERTY IS _____]

_____ # OF FURNISHED UNITS

88 DON'T KNOW

99 REFUSED

B15. Are any residential housing units at [PROPERTY ADDRESS] under rent control, rent stabilization or some other type of rent regulation? (POMS Q17, Rev)

1 YES.

IF YES, How many units?

TOTAL UNITS ON PROPERTY IS <ANSWER TO B11>

2 NO.

88 DON'T KNOW

99 REFUSED

Now we have a few questions about the costs associated with operating the property at [PROPERTY ADDRESS].

B16. In 2007/2008,

A. What were the annual overall [INSERT THE LIST HERE] costs for this property? **[IF ANSWERED "NONE", SKIP TO NEXT ITEM ON THE LIST]**

B. Was this smoking related?

C. Would you have done it anyway?

D. And what proportion of the annual overall cost was smoke-related? You can give me a percentage or a dollar amount. **[SKIP IF ANSWERED "NO" TO B]**

E. Did you withhold any security deposit to cover the cost?

F. What was the amount of the security deposits withheld? **[SKIP IF ANSWERED "NO" TO E]** (POMS Q24a, Rev)

	A. Annual Overall Cost	B. Was this smoking related?		C. Would you have done it anyway		D. Annual Smoking- related Cost	E. Did you withhold any security deposits?		F. What was the Amount of the security deposits withheld?
		Yes	No	Yes	No		Yes	No	
a. Cleaning	\$_____	1	2	1	2	\$_____ OR %_____	1	2	\$_____
b. Property insurance	\$_____	1	2	1	2	\$_____ OR %_____	1	2	\$_____
c. Repairs and maintenance	\$_____	1	2	1	2	\$_____ OR %_____	1	2	\$_____
d. Trash collection	\$_____	1	2	1	2	\$_____ OR %_____	1	2	\$_____
e. Fire damage	\$_____	1	2	1	2	\$_____ OR %_____	1	2	\$_____
f. Legal costs	\$_____	1	2	1	2	\$_____ OR %_____	1	2	\$_____
g. Administration costs (staff time)	\$_____	1	2	1	2	\$_____ OR %_____	1	2	\$_____

i. Painting or decorating	\$ _____	1	2	1	2	\$ _____ OR % _____	1	2	\$ _____
j. Fire insurance	\$ _____	1	2	1	2	\$ _____ OR % _____	1	2	\$ _____
k. Other insurance (Specify: _____)	\$ _____	1	2	1	2	\$ _____ OR % _____	1	2	\$ _____
l. Other operating costs not listed above	\$ _____	1	2	1	2	\$ _____ OR % _____	1	2	\$ _____

And still focusing on this property

B17. How many of your rental units on the property at [PROPERTY ADDRESS] handicapped-accessible? (POMS Q8a, Rev)

- _____ # OF UNITS
 88 DON'T KNOW
 99 REFUSED

C. BUILDING CHARACTERISTICS

C1. When was the building with the most recently vacated unit at [PROPERTY ADDRESS] originally built? (POMS Q11, Rev)

- Year _____
 1 2005 OR LATER
 2 2000 – 2004
 3 1995 – 1999
 4 1990 – 1994
 5 1985 – 1989
 6 1980 – 1984
 7 1975 – 1979
 8 1970 – 1974
 9 1965 – 1969
 10 1960 – 1964
 11 1955 – 1959
 12 1950 – 1954
 13 1945 – 1949
 14 1940 – 1944
 15 1935 – 1939
 16 1930 – 1934
 17 1925 – 1929
 18 1920 – 1924
 19 1919 OR EARLIER
 88 DON'T KNOW
 99 REFUSED

Now I am going to ask you about some of the characteristics of the building at [PROPERTY ADDRESS]

C2. Is the building wood framed? (MPAAT Q6)

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

C3. Does the building have individual furnaces for each unit? (MPAAT Q6)

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

C4. Does the building have any type of central ventilation (like a central fan to ventilate all the bathrooms, or a central fan providing fresh air to the corridors)? (MPAAT Q6)

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

D. UNIT CHARACTERISTICS

Now please think about the unit that was most recently vacated.

D1. How many bedrooms does this unit have?

- _____ # OF BEDROOMS
- 88 DON'T KNOW
- 99 REFUSED

D2. How many bathrooms does this unit have?

- _____ # OF BATHROOMS
- 88 DON'T KNOW
- 99 REFUSED

D3. Does this unit have a kitchen?

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

[INTV: SKIP TO D5 IF B14 = 0]

D4. Is this unit rented furnished?

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

D5. What was the monthly rent charged to the preceding tenant for the unit? **(DO NOT READ LIST; CHECK ONE)** (POMS Q4a, Rev)

- 1 WAS OCCUPIED RENT-FREE

- 2 LESS THAN \$100
- 3 \$100 - \$199
- 4 \$200 - \$299
- 5 \$300 - \$399
- 6 \$400 - \$499
- 7 \$500 - \$599
- 8 \$600 - \$699
- 9 \$700 - \$799
- 10 \$800 - \$899
- 11 \$900 - \$999
- 12 \$1000 - \$1099
- 13 \$1100 - \$1199
- 14 \$1200 - \$1299
- 15 \$1300 - \$1399
- 16 \$1400 - \$1499
- 17 \$1500 - \$1599
- 18 \$1600 - \$1699
- 19 \$1700 - \$1799
- 20 \$1800 - \$1899
- 21 \$1900 - \$1999
- 22 \$2000 - \$2099
- 23 \$2100 - \$2199
- 24 \$2200 - \$2299
- 25 \$2300 - \$2399
- 26 \$2400 - \$2499
- 27 \$2500 - \$2599
- 28 \$2600 - \$2699
- 29 \$2700 - \$2799
- 30 \$2800 - \$2899
- 31 \$2900 - \$2999
- 32 \$3000 OR MORE
- 88 DON'T KNOW
- 99 REFUSED

D6. Was the monthly rent for the preceding tenant partially or completely paid by: (POMS Q4c)

	YES	NO	DON'T KNOW	REFUSED
a. The Federal Section 8 certificate or voucher program?	1	2	88	99
b. TANF, General Assistance, or any other welfare program	1	2	88	99
c. Another Federal housing subsidy program?	1	2	88	99
d. Another state or local housing subsidy program?	1	2	88	99
e. None of the above	1	2	88	99

D7. How long was the preceding tenant living in the unit?

DO NOT READ LIST (POMS Q6)

- 1 LESS THAN ONE YEAR
- 2 1 YEAR
- 3 MORE THAN 1 YEAR BUT LESS THAN 2 YEARS
- 4 2 YEARS
- 5 MORE THAN 2 YEARS
- 88 DON'T KNOW
- 99 REFUSED

Now, we have a few more questions about the most recently vacated unit at [PROPERTY ADDRESS], the work you performed on the unit, and the associated costs.

D8. In the past 5 years,

A. Have you [INSERT THE LIST HERE] (to) the rental unit? **[IF ANSWERED “NO”, SKIP TO NEXT ITEM ON THE LIST]**

B. What was the overall cost of the work?

C. Was it smoking related?

D. Would you have done it anyway?

E. What was the overall smoke-related cost for the work? **[SKIP IF ANSWERED “NO” TO C]**

F. Did you withhold any part of the security deposit to cover the cost?

G. What was that amount? **[SKIP IF ANSWERED “NO” TO F]** (POMS Q10, Rev)

	A. Work done in past 5 years		B. Overall Cost	C. Was it smoking related?		D. Would you have done it anyway		E. Smoke-related Cost	F. Did you withhold any security deposit?		G. Amount withheld from security deposit
	Yes	No		Yes	No	Yes	No		Yes	No	
a. Painted interior	1	2	\$ _____	1	2	1	2	\$ _____	1	2	\$ _____
b. Replaced carpets	1	2	\$ _____	1	2	1	2	\$ _____	1	2	\$ _____
c. Repaired heating / air conditioning	1	2	\$ _____	1	2	1	2	\$ _____	1	2	\$ _____
d. Re-furnished	1	2	\$ _____	1	2	1	2	\$ _____	1	2	\$ _____
e. Re-wired	1	2	\$ _____	1	2	1	2	\$ _____	1	2	\$ _____
f. Other (Specify _____)	1	2	\$ _____	1	2	1	2	\$ _____	1	2	\$ _____

NOTE: ADD “DK” AND “REFUSED” AT ALL SUBSECTIONS.

E. PROPERTY SMOKING POLICIES

Now I am going to ask you about smoking policies at [PROPERTY ADDRESS]. Please include all buildings on this property if there are more than one in your responses.

E1. Have you ever asked your prospective tenants if they smoke?

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

E2. Have you ever asked your current tenants if they smoke?

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

E3. What percentage of your current tenants do you think smoke? (ALA Q7, Rev)

- 1 None,
- 2 A few,
- 3 Some,
- 4 Most, or
- 5 All?
- 88 DON'T KNOW
- 99 REFUSED

E4. Is the property at [PROPERTY ADDRESS] completely “smoke-free”?

[IF NECESSARY:

Completely “smoke-free” means no smoking anywhere on the property, whether in private units or in public.]

- 1 YES (**SKIP TO E10**)
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

E5. Have you ever designated any of your residential rental buildings at this property “smoke free”? (MPAAT Q22, Rev)

- 1 YES
- 2 NO (**SKIP TO E7**)
- 88 DON'T KNOW
- 99 REFUSED

E6. How many buildings did you designate as “smoke-free” at this property? (MPAAT Q23)

- _____ # OF BUILDINGS
- 88 DON'T KNOW
- 99 REFUSED

E7. Have you ever designated any public place (i.e. indoor corridor, hallway, etc) as “smoke-free” at this property?

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

E8. Have you ever designated any unit within the [PROPERTY ADDRESS], rather than whole buildings, as smoke-free? (MPAAT Q24)

- 1 YES
- 2 NO (**SKIP TO E10**)
- 88 DON'T KNOW
- 99 REFUSED

E9. How many units did you designate as “smoke-free” in this building?

- _____ # OF UNITS
- 88 DON'T KNOW
- 99 REFUSED

[INTV: IF ANSWERED “NO” TO ALL E4, E5, E7 AND E8, SKIP TO E11]

E10. Is the “smoke-free” policy listed on the lease for the tenants?

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

E11. How interested are you in designating one or more of your buildings at [PROPERTY ADDRESS] as smoke-free? Would you say: (**READ LIST; CHECK ONE**) (MPAAT Q47)

- 1 Not at all interested
- 2 A little interested
- 3 Somewhat interested, or
- 4 Very interested
- 88 DON'T KNOW

99 REFUSED

Now, I'm going to ask you some questions about the movement of secondhand smoke, also known as environmental tobacco smoke, in apartment buildings on this property. For these questions, please consider only secondhand smoke that moves into tenants' apartments from elsewhere on the premises, that is, from other apartments, from common areas, or from the grounds. (MPAAT)

F. PROBLEM OF SECONDHAND SMOKE ON THIS PROPERTY

F1. On this property, how many of your buildings would you say experience movement of secondhand smoke into apartments on a regular or recurring basis? Would you say: (MPAAT Q14)

- 1 None of them, **(SKIP TO F7)**
- 2 A few of them,
- 3 Some of them,
- 4 Most of them, or
- 5 All of them?
- 88 DON'T KNOW
- 99 REFUSED

F2. On this property, in the buildings where secondhand smoke does move into apartments on a regular or recurring basis, how often is this a significant factor in existing tenants' decision to move? (MPAAT Q15)

- 1 Never,
- 2 Rarely,
- 3 Sometimes, or
- 4 Often?
- 88 DON'T KNOW
- 99 REFUSED

F3. In these buildings, how often is the movement of secondhand smoke into apartments a significant factor in potential tenants' decision whether or not to rent? (MPAAT Q16, Rev)

- 1 Never,
- 2 Rarely,
- 3 Sometimes, or
- 4 Often?
- 88 DON'T KNOW
- 99 REFUSED

F4. In these buildings, how often does secondhand smoke movement into apartments require significant staff time to resolve tenants' complaints? (MPAAT Q17)

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Often
- 88 DON'T KNOW
- 99 REFUSED

F5. How does secondhand smoke get into a tenant's apartment from elsewhere on the premises?

SELECT ALL THAT APPLY

PROBE: Any other routes?) (MPAAT Q18)

- 1 VIA THE CORRIDORS/HALLWAYS
- 2 VIA CRACKS IN WALLS, FLOORS, ETC.

- 3 VIA THE MECHANICAL VENTILATION SYSTEM
- 4 VIA PATIOS OR BALCONIES
- 5 VIA OPEN WINDOWS (OTHER THAN THOSE ON PATIOS OR BALCONIES)
- 6 OTHER (SPECIFY BELOW;)
- 88 DON'T KNOW
- 99 REFUSED

(IF ONLY ONE CHOICE SELECTED IN F5, **SKIP** TO F7)

F6. And of the routes you just mentioned, what is the *most common* route for secondhand smoke to get into a tenant's apartment? (**DO NOT READ LIST; CHECK ONE**) (MPAAT Q19)

- 1 VIA THE CORRIDORS/HALLWAYS
- 2 VIA CRACKS IN WALLS, FLOORS, ETC.
- 3 VIA THE MECHANICAL VENTILATION SYSTEM
- 4 VIA PATIOS OR BALCONIES
- 5 VIA OPEN WINDOWS (OTHER THAN THOSE ON PATIOS OR BALCONIES)
- 6 OTHER (SPECIFY BELOW:)
- 88 DON'T KNOW
- 99 REFUSED

F7. If secondhand smoke moves into an apartment from elsewhere on the premises, do you consider it a health issue for the tenants? Would you say it's... (MPAAT Q20)

- 1a minor health issue (contributing to eye irritation, headaches, or sneezing, for example)
- 2a major health issue (contributing to the risk of cancer or heart disease, for example), or
- 3not a health issue?
- 88 DON'T KNOW
- 99 REFUSED

G. SMOKE FREE POLICY AND ENFORCEMENT

Now I am going to ask you about the viability of smoke-free rental housing.

G1. In the market segments you rent to, do you think there is a viable market for smoke-free rental housing if it were made available? (MPAAT Q37)

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

G2. In the future, do you think the issue of smoke-free rental housing will (MPAAT Q38)

- 1 Become less important than it is today,
- 2 Remain the same, or
- 3 Become more important than it is today?
- 88 DON'T KNOW
- 99 REFUSED

[INTV: IF ANSWERED "YES" TO E4 OR E5, THEN SKIP TO G5]

G3. Now I'll ask you about the potential benefits and concerns of designating all or part of your property smoke free.

How important to you is designating all or part of your property smoke-free to .. (MPAAT Q41, Rev)

	Would you say... Not at all	Not important	Somewhat important	Very important	DON'T KNOW	REFUSED
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	important					
a. Attract more non-smokers?	1	2	3	4	88	99
b. Attract "better" tenants?	1	2	3	4	88	99
c. Lower maintenance costs (e.g. repainting and cleaning of walls and fixtures)?	1	2	3	4	88	99
d. Reduce hassles between tenants over objectionable air?	1	2	3	4	88	99
e. Provide better environment within the property?	1	2	3	4	88	99
f. Reduce insurance costs due to smoke free designation?	1	2	3	4	88	99
g. Increase rental prices?	1	2	3	4	88	99

G4. If you designated one or more of your buildings smoke-free, how concerned would you be about ..
(MPAAT Q44, Rev)

	Would you say... Not at all concerned	Not concerned	Somewhat concerned	Very concerned	DON'T KNOW	REFUSED
a. Increased vacancy rate?	1	2	3	4	88	99
b. Increased turnover?	1	2	3	4	88	99
c. Decreasing the size of the market to whom units can be rented?	1	2	3	4	88	99
d. Increased staff time to enforce the smoke-free designations?	1	2	3	4	88	99
e. Legal costs to enforce the smoke-free designation, evict noncompliant tenants, or defend owner against claims of non-enforcement?	1	2	3	4	88	99
f. Legal issues related to discrimination or disability*?	1	2	3	4	88	99
g. The smoke-free designation being permitted by federal, state or local regulations governing LIPH, Section 8 housing or other publicly assisted housing?	1	2	3	4	88	99

* That designating buildings smoke-free is discriminatory, that smoking is a disability or is linked with protected classes under civil rights law, etc.

Now, I'm going to ask you about the movement of secondhand smoke or other objectionable air.

G5. [INTV: IF ANSWERED "YES" TO E4, THEN SKIP TO G6] If you made modifications to your buildings to reduce the movement of secondhand smoke or other objectionable air into apartments, how concerned would you be about ... ? (MPAAT Q56, Rev)

	Would you say... Not at all concerned	Not very concerned	Somewhat concerned	Very concerned	DON'T KNOW	REFUSED
a. Cost	1	2	3	4	88	99
b. The effectiveness of the modifications in reducing second hand smoke movement	1	2	3	4	88	99

c. Disruption of tenants' lives	1	2	3	4	88	99
d. Raising tenants' expectations beyond what can be delivered	1	2	3	4	88	99
e. Other issues (Please specify _____)	1	2	3	4	88	99

G6. If there were ways available to substantially reduce movement of secondhand smoke or other objectionable air into apartments in your buildings, how much do you think you would be willing to spend per apartment to implement them (on a one-time basis)? Would you say: (MPAAT Q58)

- 1 Nothing
- 2 Less than \$250 per apartment,
- 3 More than \$250, but less than \$500,
- 4 More than \$500, but less than \$1,000, or
- 5 More than \$1,000 per apartment?
- 88 DON'T KNOW
- 99 REFUSED

[INTV: IF ANSWERED "NO" TO E4, E5 AND E8, THEN SKIP TO THE END OF THE SURVEY]

G7. Why did you designate some buildings or units as smoke-free? (MPAAT Q25, Rev)

- 1 TO REDUCE FIRE HAZARDS
- 2 FOR THE HEALTH OF THE TENANTS
- 3 TO REDUCE PROPERTY DAMAGE OR COST
- 4 TENANTS COMPLAINTS
- 5 GOVERNMENT REQUIREMENT
- 6 EVERY OWNER/MANAGER DOES SO
- 7 PERSONALLY DON'T LIKE SMOKE
- 8 LOWER INSURANCE RATE
- 9 OTHERS (SPECIFY BELOW)
- 88 DON'T KNOW
- 99 REFUSED

G8. How did you enforce the smoke-free designation? Did you use... (MPAAT Q29)

- 1 Restrictions in the lease itself,
- 2 Restrictions in rules, guidelines, or policies,
- 3 Signage posted in the building, or
- 4 Other means? (What other means did you use to enforce the smoke-free designation?
_____)
- 88 DON'T KNOW
- 99 REFUSED

G9. How likely are you to continue offering smoke free rental buildings or units in the future? Are you (READ LIST, CHECK ONE): (MPAAT Q30)

- 1 Not at all likely, _____)
- 2 Somewhat likely, or
- 3 Very likely?
- 88 DON'T KNOW
- 99 REFUSED

G10. Considering either whole buildings or units within buildings that you have designated smoke-free, did the smoke-free designation decrease, have no effect or increase turnover in the building? (MPAAT Q31)

- 1 DECREASE
- 2 NO EFFECT
- 3 INCREASE
- 88 DON'T KNOW
- 99 REFUSED

G11. Did the smoke-free designation decrease, have no effect or increase the vacancy rate in the building? (MPAAT Q32)

- 1 DECREASE
- 2 NO EFFECT
- 3 INCREASE
- 88 DON'T KNOW
- 99 REFUSED

G12. Did the smoke-free designation decrease, have no effect or increase the amount of rent you could charge for the units? (MPAAT Q33)

- 1 DECREASE (□How much of a decrease per unit per month? \$_____)
- 2 NO EFFECT
- 3 INCREASE (How much of an increase per unit per month? \$_____)
- 88 DON'T KNOW
- 99 REFUSED

G13. Did the smoke-free designation decrease, have no effect or increase the amount of staff time required to manage the building? (MPAAT Q34)

- 1 DECREASE (Why? _____) (**SKIP TO G15**)
- 2 NO EFFECT (**SKIP TO G15**)
- 3 INCREASE (Why? _____)
- 88 DON'T KNOW
- 99 REFUSED

G14. Was the increase in staff time worth it in terms of other benefits? (MPAAT Q34)

- 1 YES
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

G15. Did the smoke-free designation lead to any complaints from tenants, or to any legal actions, either by you or by the tenants?

[IF NEEDED: For example, complaints from non-smoking tenants that you were not enforcing the smoke-free designation, complaints from smoking tenants that they were being discriminated against, legal actions taken by one tenant against another for smoking in a smoke-free building, or actions taken by you to terminate a lease or evict a tenant due to smoking in a smoke-free building]. (MPAAT Q35)

- 1 YES. (What type or complaint and what was the outcome?
_____)
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

G16. Were there any other positive or negative consequences of the smoke-free designation that you want to mention? (MPAAT Q35)

- 1 YES. (Can you describe that to me? _____)
- 2 NO
- 88 DON'T KNOW
- 99 REFUSED

CLOSE. And those are all the questions I have for you today.
Thank you very much for completing the survey.

I will need your mailing information so that we may send you your \$25 Target gift card. Please be assured that we will not use your contact information for any other purpose.

