



MULTIPLE DWELLING REGISTRATION

The Rockland County Multiple Dwelling Smoking Policy Act

Effective January 1, 2012 (amended October 2012)

Article IV. Smoking in Multiple Dwellings

COMPLETE SECTIONS A, B AND C

Section A: Multiple Dwelling Information

Name of Multiple Dwelling Complex: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of Buildings: \_\_\_\_\_ Total number of dwelling units: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

email address: \_\_\_\_\_

Owner/Operator: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Property Manager: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Superintendent: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Section B: NYS Department of State Corporation Information

Corporation Name: \_\_\_\_\_ Date incorporated: \_\_\_\_\_

Corporate Officers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Corporation Address: \_\_\_\_\_  
\_\_\_\_\_

Section C: Multiple Dwelling Smoking Policy [\*MANDATORY SUBMISSION OF POLICY IF 5 OR MORE DWELLING UNITS]

Please check one:

- Smoking permitted in all dwelling units
- Smoking restricted in all dwelling units
- Smoking limited to certain dwelling units

\*Complete the attached Smoking Policy.  
Return with Registration Form.

**PLEASE READ THE FOLLOWING CAREFULLY:**

- I acknowledge that the above referenced multiple dwelling complex has 5 or more dwelling units and that I am required to submit a smoking policy to the Rockland County Health Department.
- I understand that the multiple dwelling complex must at all times be in compliance with all state, county and local regulations. As such I must at all times abide by the New York State Clean Indoor Air Act (NYS CIAA), the Rockland County Sanitary Code, Article XXII as well as Rockland County local law Article IV, Smoking in Multiple Dwellings.
- Although smoking may be permitted in dwelling units, smoking remains prohibited in all indoor common areas, including but not limited to public hallways, laundry rooms and meeting or community rooms as well as in any management offices, maintenance garages, shops and storage rooms located on the premises.
- Furthermore smoking is prohibited under contiguous awnings or overhangs, which are physically attached to the building.
- I am required to post “No Smoking” signs in all indoor public and/or employee areas of the multiple dwelling complex.
- All current and prospective tenants received written notice of the smoking policy and a copy of the smoking policy is posted in all public areas.

**FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE UNDER THE PENAL LAW.**

Failure to completely fill out and sign this form will result in enforcement. Operation without a smoking policy is a violation of the Rockland County Multiple Dwelling Local Law and is punishable by a penalty of up to two thousand (\$2,000.00) per day.

Signature of owner/operator or authorized representative: \_\_\_\_\_

Title: \_\_\_\_\_

Printed name of person signing: \_\_\_\_\_ Date: \_\_\_\_\_

The registration form will be reviewed to ensure that all required information is accurate. If you do not adhere to the policy submitted, you will be notified, and subject to enforcement. Failure to comply with the county and/or state smoking laws will result in enforcement, which includes penalties in the amount of up to two thousand dollars (\$2,000.00) per violation.

**MAIL COMPLETED REGISTRATION FORM TO:**

Rockland County Department of Health  
 Housing/RCI  
 Attention: Catherine Johnson Southren, Esq.  
 50 Sanatorium Road, Building D  
 Pomona, New York 10970

Should you have any questions pertaining to the Rockland County Multiple Dwelling Local Law, Rockland County Sanitary Code Article XXII or the New York State Clean Indoor Air Act, Public Health Law Article 13-E, please contact **Catherine Johnson Southren (845) 364-2572**.

<b>FOR HEALTH DEPARTMENT USE ONLY - PLEASE DO NOT WRITE IN THIS BOX</b>		
Satisfies requirements of <b>MULTIPLE DWELLING SMOKING LAW:</b>	<input type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
Catherine Johnson Southren, Esq. Public Health Sanitarian		
_____ <b>signature</b>	_____ <b>date</b>	