

KANKAKEE COUNTY HOUSING AUTHORITY
185 NORTH ST. JOSEPH STREET
KANKAKEE, IL 60901

SMOKING POLICY



Adopted: 1/22/2008
Resolution #: 08 - 27
Effective Date: 1/1/08

Purpose

The General Assembly of the State of Illinois passed the Smoke Free Illinois Act [Public Act 95-0017] effective January 1, 2008. This policy implements the provisions of the Smoke Free Illinois Act in order for the employees and residents of the Housing Authority to enjoy a smoke free environment when working or when residents are on Housing Authority property.

Scope

This policy is in affect for all Kankakee County Housing Authority (KCHA) owned and/or leased facilities and all vehicles owned or leased by the KCHA.

Statement of Policy

It is the policy of the KCHA to fully comply with, and to enforce the provision of the Smoke Free Illinois Act. Under the Act: Smoking means carrying, smoking, burning, inhaling, or exhaling any kind of lighted pipe, cigar, cigarette, hookah, weed, herbs, or any other lighted smoking equipment.

Smoking is prohibited in all public places or place of employment or within 15 feet of an entrance to a public place or place of employment unless exempted by the act. No person may smoke in any vehicle owned, leased, or operated by the KCHA.

Smoking is permitted outside the facility but must be 15 feet from any entrances, exits, windows that can be opened, or intake vents.

Smoking is also prohibited throughout the KCHA including, but not limited to:

- Lobbies, hallways, stairways and other common areas
- Restrooms, kitchens and lounges
- Conference and meeting rooms
- Private offices and residential units

Conclusion

Failure to comply with the KCHA Smoking Policy may result in disciplinary action up to and including termination.

Smoking Policy User Agreement

I have received a copy of the Smoking Policy. As an employee of KCHA, I understand that this policy applies to me. I have read KCHA's Smoking Policy and agree to follow all of its provisions, for the duration of my employment with the KCHA.

I am aware that any violation of this policy may subject me to disciplinary action, up to and including discharge from employment. If I have any questions regarding this policy, I will request clarification from my Supervisor or the Human Resources Administrator.

Employee Signature

Date

Employee Printed Name