UK Clean Indoor Air Partnership Adherence Evaluation of <insert community name> Smoke-free law

Establishment name:		
Date:		
By ob	servation:	
1.	Is a "no-smoking" sign posted at entrance to establishment?	Yes No
	If yes, is it in clear view?	Yes No
	If yes, is the sign the official health department stick?	Yes No
2.	Are any ashtrays present inside the establishment?	Yes No
3.	Is there an outside seating area?	Yes No
4.	Were those smoking outside doing so a reasonable distance from the entrance to prevent smoke from filtering into the establishment?	Yes No
5.	Where are the patrons smoking?	Outside front entrance
		Outside back entrance Patio Other
	About how many feet away from entrance to building?	0-5 6-10 More than 10
6.	Are butt receptacles available?	Yes No
	If yes, where are they located?	
		Outside front entrance
7	How much aignostic but litter is present and where is it leasted?	Outside back entrance Patio Other
7.	How much cigarette butt litter is present and where is it located? (i.e. rough number of butts and location observed)	
		0 1-5 6-10 11-20 More than 20

8. Establishment type:	Restaurant not serving alcohol
	Restaurant serving alcohol
	Bar

Establishment name: _____