

## Non-Smoker / Non-Tobacco User Certification

The purpose of this Non-Smoker/Non-Tobacco User Certification is to document whether you qualify for the discounted medical contribution that is for non-smokers/non-tobacco users. To qualify for the discounted contribution under Pine Belt Enterprises' Health Benefit Plan, you must <u>not</u> have used tobacco products <u>for six months prior to the date you complete and sign this Certification.</u>

## By signing this Certification, I certify that:

- I am a non-smoker/non-tobacco user and have not smoked a cigarette, cigar, pipe, or used tobacco products such as chewing tobacco, vapors, e-cigarettes of any kind in any form in the six months prior to date of signing this Certification.
- I understand that it is my responsibility to notify Human Resources if I begin to smoke / use tobacco at any future date.
- I understand that Pine Belt Enterprises may require me to re-certify my non-smoker / non-tobacco user status in the future but not more than once a year.
- I understand that if I smoke/use tobacco, I will lose my \$23.07 per weekly pay discount and that my payroll contribution will immediately increase.
- I understand that any dishonest or false representation of my non-smoking / non-tobacco use status will result in immediate loss of my per pay discount. This may result in Pine Belt Enterprises requiring me to reimburse them for any amounts reduced from my contributions for the period in which I claimed I was eligible for the discount. Pine Belt Enterprises may deduct such amount from my paycheck.

Employee's First Name (Print)	Middle	Last Name
Employee's Signature		Date

Note: If you use tobacco and would like help quitting, simply sign up for a tobacco cessation program at <a href="https://www.freedomfromsmoking.org">www.freedomfromsmoking.org</a> and click Join Now. After completing the program, please print your Certificate of Completion and send it to HR to receive your total reimbursement for the program. You will then become eligible for the employee contribution reduction retroactively.

Please return completed form to Cathy D'Ambrosio in payroll.

If not returned, then it is assumed that you are a tobacco user and your weekly payroll contribution will increase by \$23.07.