

Premises – record of inspection

Hammersmith & Fulham Licensing Section Town Hall Extension, 6th Floor, W6 9JU

Name of premises	Co - Op		
Address	54 Uxbridge Road		
	Post code	W12 8LP	
Person spoken to	Ajinesh Salin Nesh Kumar		
Position	Manager		
	Date	13 / 06 / 2025	
	Time	17:10	

Premises licence

Premises type	Off licence	Capacity	N/A
---------------	-------------	----------	-----

Activities at time of inspection:

<input checked="" type="checkbox"/> Sale of alcohol	<input type="checkbox"/> Late night refreshment	<input type="checkbox"/> Plays	<input type="checkbox"/> Boxing or wrestling	<input type="checkbox"/> Live music
<input type="checkbox"/> Recorded music	<input type="checkbox"/> Performance of dance	<input type="checkbox"/> Films	<input type="checkbox"/> Indoor sporting events	<input type="checkbox"/> Anything similar

Licence displayed:

☒ Yes ☐ No

Full licence available:

☐ Yes ☐ No

Letter of designated authority:

☐ Yes ☐ No

DPS ~~Not Available at time of U.S.R.~~

Personal licence available: ☐ Yes ☒ No

Staff aware of conditions: ☐ Yes ☒ No

Breach of conditions: ☒ Yes ☐ No

Details of breaches or other matters identified during the inspection:

Condition #6, #12, 13, 14
#8, #9

Health & safety (tick if unsatisfactory):

<input type="checkbox"/> Overcrowding	<input type="checkbox"/> Escape routes	<input checked="" type="checkbox"/> Fire extinguishers - Fully compliant.
<input type="checkbox"/> Fire doors	<input type="checkbox"/> Capacity limit	<input type="checkbox"/> Queuing control

Further comments:

Improvements to be made in order to be fully compliant with the current licensing conditions - 6, 8, 9, 12, 13, 14

Please tick as applicable:

I certify that the issue(s) identified above have been brought to my attention and I undertake to rectify any breaches identified above. I have been advised that formal action may be taken for the above breaches. Tick to accept ☒

Name	Ajinesh Salin Nesh Kumar
Signature	

Officer	F. Simons
Signature	

Premises – record of inspection

Hammersmith & Fulham Licensing Section Town Hall Extension, 6th Floor, W6 9JU

Name of premises	Co - Op		
Address	54 Uxbridge Road		
	Post code	W12 8LP	
Person spoken to	Ajinesh Salin Nesh Kumar		
Position	Manager		
	Date	13 / 06 / 2025	
	Time	17:10	

Premises licence

Premises type	off licence	Capacity	N/A
---------------	-------------	----------	-----

Activities at time of inspection:

- | | | | | |
|-----------------------------------------------------|-------------------------------------------------|--------------------------------|-------------------------------------------------|-------------------------------------------|
| <input checked="" type="checkbox"/> Sale of alcohol | <input type="checkbox"/> Late night refreshment | <input type="checkbox"/> Plays | <input type="checkbox"/> Boxing or wrestling | <input type="checkbox"/> Live music |
| <input type="checkbox"/> Recorded music | <input type="checkbox"/> Performance of dance | <input type="checkbox"/> Films | <input type="checkbox"/> Indoor sporting events | <input type="checkbox"/> Anything similar |

Licence displayed:

☒ Yes ☐ No

Full licence available:

☐ Yes ☐ No

Letter of designated authority:

☐ Yes ☐ No

DPS *Not available at time of visit*

Personal licence available: ☐ Yes ☒ No

Staff aware of conditions: ☐ Yes ☒ No

Breach of conditions: ☒ Yes ☐ No

Details of breaches or other matters identified during the inspection:

Condition #6, #12, 13, 14 #8 #9

Health & safety (tick if unsatisfactory):

- | | | |
|---------------------------------------|-----------------------------------------|---------------------------------------------------------------------------|
| <input type="checkbox"/> Overcrowding | <input type="checkbox"/> Escape routes | <input checked="" type="checkbox"/> Fire extinguishers - Fully compliant. |
| <input type="checkbox"/> Fire doors | <input type="checkbox"/> Capacity limit | <input type="checkbox"/> Queuing control |

Further comments:

Improvements to be made in order to be fully compliant with the current licensing conditions - 6, 8, 9, 12, 13, 14

Please tick as applicable:

I certify that the issue(s) identified above have been brought to my attention and I undertake to rectify any breaches identified above. I have been advised that formal action may be taken for the above breaches. Tick to accept ☒

Name	Ajinesh Salin Nesh Kumar	Officer	F. Simms
Signature		Signature	