

**REPORT OF PREMISES INSPECTION**

Date and Time of Inspection: 1. 7. 23 / 11am	DPS: No DPS in Place
Premises Details: 3ave nise Drayisden	Person spoken to: [REDACTED]
Premise Licence No.	Contact Number:
Premise Licence Holder:	Email:
	Designation:
	Personal Lic. No:

Food Premises: Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>Gaming Machines</b>	Cat C..... Cat D.....
Late Night Ref. Lic. Required Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of Gaming Machines in Premises .....	Gamcare Yes No
Late Night Ref. Lic. In Place Yes <input type="checkbox"/> No <input type="checkbox"/>	Gaming Machine: Yes/ No Lic No.....Issued.....	Labelled Yes No
	Club Gaming Machine Yes/No Lic No.....Issued.....	Under 18 Yes No
		Labelled Yes No

Comments / Observations / Actions

Summary Displayed Yes  No  DPS Alcohol Authorisation Yes  No  Smoking Signage Yes  No

<b>Protection of Children from Harm</b> Underage/I.D Policy <input checked="" type="checkbox"/> Signage <input checked="" type="checkbox"/>	<b>Prevention of Public Nuisance</b> Noise Limiter Control <input type="checkbox"/> Self Closing Doors <input type="checkbox"/> Signage <input type="checkbox"/> Litter <input type="checkbox"/>
<b>Public Safety</b> Emergency Lights <input type="checkbox"/> Fire Risk Assessment <input type="checkbox"/> Fire Log Book <input type="checkbox"/> Fire Safety Equipment <input type="checkbox"/> Emergency Exits <input type="checkbox"/>	<b>Prevention of Crime &amp; Disorder</b> CCTV <input checked="" type="checkbox"/> Glassware <input type="checkbox"/> Drug Awareness Policy/Signage <input type="checkbox"/>

Door Person (s) on Duty: Yes  No  How Many  SIA Registered: Yes  No  Door Persons Log Book

Waste Transfer contract in place Yes  No  Information:

Trade Waste contract in place Yes  No  Information:

Additional Comments:  
2x fridges with Alcohol total  
MR Harpak Malampor to remove all Alcohol today

Signature of Person interviewed: \_\_\_\_\_ Date: 3.4.23

**IF YOU NEED TO CONTACT US TO DISCUSS THIS PLEASE CONTACT:**  
Licensing, Tame Street, Stalybridge, SK15 1ST or email: [licensing@tameside.gov.uk](mailto:licensing@tameside.gov.uk)

Officer Name: \_\_\_\_\_ Signed: \_\_\_\_\_

Telephone: 0161 342 4262