

APPENDIX E

September 25

Monmouthshire C.C.
Licensing Section

Flat 22,
Pegasus Court,
Mill Street,
Abergavenny
NP7 5EX

Dear Sirs,
I am writing on behalf of the residents of Pegasus Court. We are a Retirement Complex consisting of 27 flats located opposite the proposed Pugh's Garden Kitchen at 7-9 Mill Street NP7 5EX.

We wish to object to Pugh's application for a license to sell alcoholic beverages at this location. The reason for our objection is that alcohol sales will lead to anti-social behavior negatively affecting our quality of life.

Yours faithfully

Chairman of the Pegasus Court Residents Association.

MONMOUTHSHIRE
COUNTY
COUNCIL

26 SEP 2025

PUBLIC FINANCE
ABERGAVENNY

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name/organisation name/name of body you represent (see note 3)	Chairman,
Organisation name/name of body you represent (if appropriate) (see note 3)	Pegasus Court Residents Association
Postal and email address Flat 22,	Tan House, Mill Street, Pegasus Court Abergavenny, NP7 5EX
Contact telephone number	

Name of the premises you are making a representation about	Pughes Kitchen Garden
Address of the premises you are making a representation about	Mill Street, Abergavenny

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	<input type="checkbox"/>	
Public safety	<input type="checkbox"/>	
To prevent public nuisance	<input checked="" type="checkbox"/>	Specifically, the residents of Pegasus Court Mill Street, Abergavenny.
To protect children from harm	<input type="checkbox"/>	

MONMOUTHSHIRE
COUNTY
COUNCIL

03 OCT 2025

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	PUBLIC PROTECTION ABERGAVENNY OFFICE
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Signed:

Date: 2/10/2025

Please see additional information sent
by email to Emma.

Watkins, Emma

From:
Sent: 17 October 2025 12:04
To: Watkins, Emma
Subject: Pugh's Garden Kitchen application for a license to sell alcohol.

Prior to your mail of October 13rd we were unaware that a license to sell alcohol was accompanied by a license to play amplified live and recorded music. We note that the Live music Act does not allow License premises to cause a noise nuisance.

Our view is that noise from the Garden Kitchen events area will cause a noise nuisance to the residents of Pegasus Court.

We note Pugh's description of their events as 'quiet and intimate' but plans change out of necessity. Retail formats that succeed in one location do not always work in another. Pugh's may decide that staging Discotheques is more profitable. We view the two other local licenced businesses differently. Aldi do little trade after 8.00pm and Vojan customers are staggered over a number of hours.

In summary, our objection to a license being given to Pugh's are these.

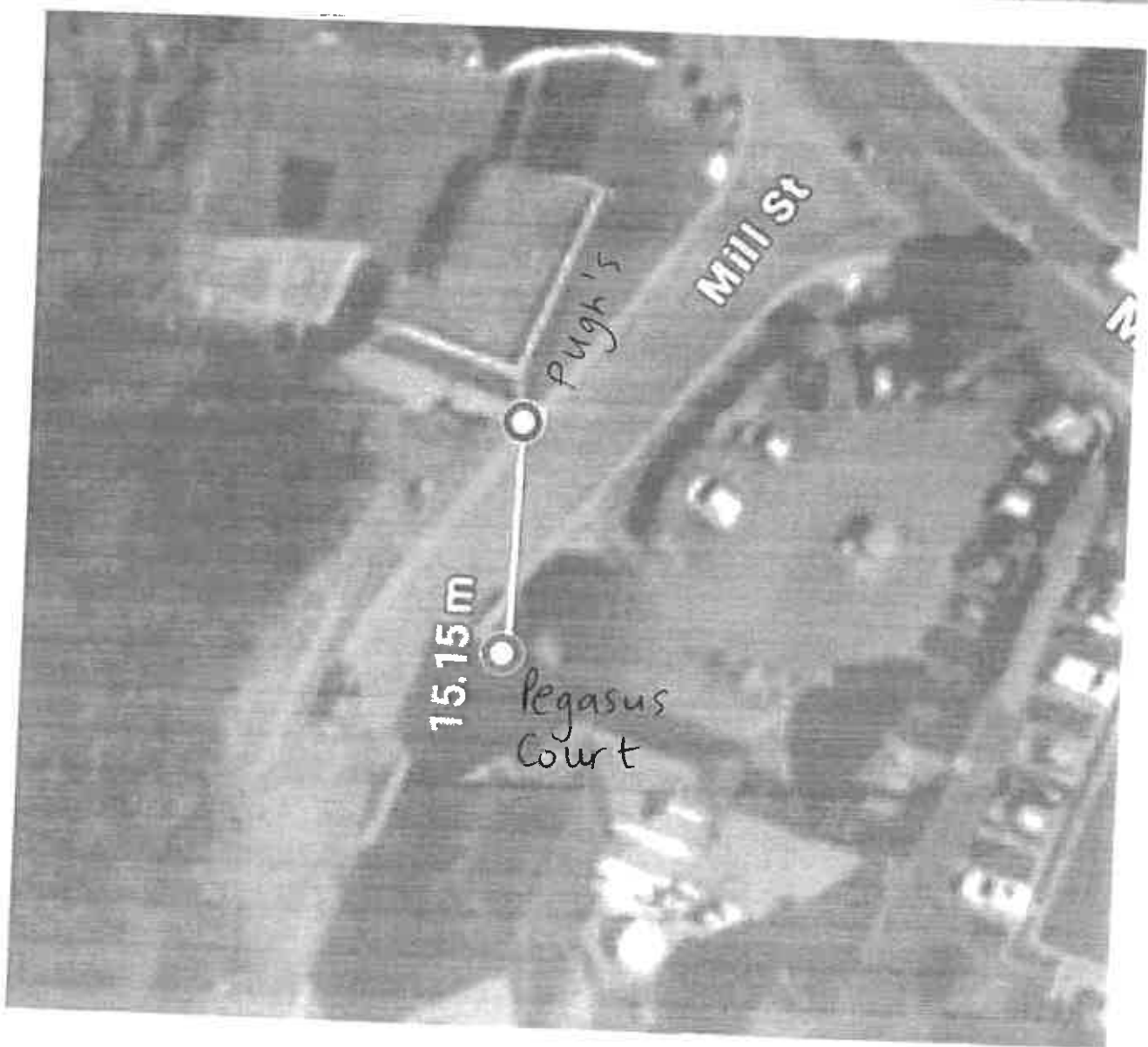
1. We will be subject to noise and vibration caused by the playing of live and recorded amplified music allied to noise that occurs with the consumption of alcohol.
2. We will experience noise caused by potentially 60 people leaving on masse after an event ending at 11.00pm.
3. The noise will be made worse by vehicles arriving at and leaving the venue.

Our conclusion is that we will be subjected to Public Nuisance if Pugh's are granted this license. Pegasus Court is located in very close proximity to Pugh's building. We would not object to this license application if the sale of alcohol and the playing of music ended at 6.00pm each day.

Emma, we would request that this email supersedes my email of October 3rd. Please attach to the Representation Form From Other Persons that I sent to you.

Best wishes,





**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	1 PECASUS COURT MILL STREET. ABERGAVENNY
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	Noise! Music & Traffic late on three nights - Close to Residential flats.
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: 20/10/25

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	FLAT 2, PEACOCK COURT, MILL STREET ABERGAVENNY, GWENT, NP23 5EX
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	See representation form from R. Richardson dated October 17th
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: October 28 2025

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	3 PUGH'S COURT ABERGAVENNY NP7 5EX
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	To prevent additional noise from already licensed area.
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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24 / 10 / 25

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	Flat 4, Pegasus Court Mill Street, Abergavenny. NP75EX
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	See Representation form from R. Richardson dated 17 th October
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: 20/10/2025

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	5 Pegasus Court, Mill Street Abergavenny NP7 5EX
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	The premises is opposite a retirement complex of 27 flats housing elderly people so it would be inappropriate
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: 21/10/25

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	6 Pegasus Court Mill Street, Abergavenny NP23 5EX
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	The license will subject me to unacceptable level of noise from both music being played at the venue and
To protect children from harm	NO Z	additional illegal parking in mill street

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: 21st October 2025

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	Flat 9, Pegasus Court, Mill Street, Abergavenny NP7 5EX
Postal and email address	
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	Extra noise and traffic at a busy time of the week. Insufficient parking.
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date:

22/10/25

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	10 Pegasus Court NP7 5EX
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	I am concerned about noise at 10pm 10, 11pm
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive. and until to Wednesday + Sunday 9pm Thursday - Saturday
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Signed:

Date: 22.10.25

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	FLAT 14 PEGASUS CRT
Contact telephone number	
Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO YES	
Public safety	NO YES	
To prevent public nuisance	YES	See Representation form for R. Richards dated 17 th October
To protect children from harm	NO YES	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: 22.10.25

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	15 Pegasus Court, Mill Street Abergavenny NP23 5EY
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	The license will subject me to unacceptable levels of noise from both music being played
To protect children from harm	NO	at the venue and additional illegal parking in Mill Street.

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: 21st October 2025

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	FLAT 19, PEGASUS COURT, MILLS, ABERGAVENNY
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	CONCERNED ABOUT LATE NIGHT DROWNEN BEHAVIOUR AND UNAUTHORISED USE OF OUR PRIVATE CAR PARK
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: 24/10/25

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	<i>Go Pegasus</i>
Postal and email address	<i>20, Pegasus Court ← after Feb/March 2 21 Hathkeleg Road } next few Abergavenny NP7 7RG } months (next few months)</i>
Contact telephone number	
Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	<i>See Representation form from D. Richards dated 17th October</i>
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: *24th Oct 2025*

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	21 PEGASUS CRT MILL ST ABERGAVENNY NP75EX
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	See Representation form from R. Richardson dated 17th October
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
--	---

Signed:

Date: 23/10/2025

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	23, PUGH'S COURT MILL ST, ABERGAVENNY.
Contact telephone number	
Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	Inevitably our "private" car park will be used, increasing the noise level & disturbance at night
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
--	---

Signed:

Date:

20.10.25.

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	26 PEGASUS COURT MILL STREET ABERGAVENNY ROBERT NEIL 270 YAHOO.COM
Contact telephone number	

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	See Representation form for 2 Licenses dated 17th October
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
--	---

Signed:

Date: 20/10/25

**Monmouthshire Licensing Authority
Licensing Act 2003**

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name	
Organisation name/name of body you represent (if appropriate) (see note 3)	
Postal and email address	28 Pegasus Court, Mill Street, Abergavenny
Contact telephone number	01753 551111

Name of the premises you are making a representation about	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about	7-9 MILL STREET, ABERGAVENNY

Your representation must relate to one of the four Licensing Objectives (see note 4)

Licensing Objective	Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
To prevent crime and disorder	NO	
Public safety	NO	
To prevent public nuisance	YES	NOISE nuisance
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
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Signed:

Date: 22-10-25