APPENDIX E

		tlat ZZ
	2	Pegasus Court
3	eptenbe/25	Pegasus Cowt, Hull Street,
		Aboraeveny
Ŋ	Monnouthshire c.c.	NP9 SEX
	Licensia Section	
	Monmonthshire c.c. Licensing Section	
_		the second secon
+		
-		
-	Dear Sors	0 0
-	1 on writing on be	half of the residents
0	Legasus Court We or	e a Ketrement Couplen
-	oughting of 27 flats 10	cated opposite the
01	oposed Pughs Garden K	itche at 7-9 Hillstree
i	DPT SHE	
	We wish to	object to Pugh's
a	pplication for a license.	
1/2	serrages at this location	. The reason for ow
	objection is that alchol	•
	quality of life.	justicely affecting our
	gooding of after.	
	V P	- Pu
	Jous fait	cufrey
	D 10 D	- cue (- + Decidente
-	Chaiman of the ve	agesus Co-t Recidents
	Association.	WONTO THE PLANT
-		COUNTY COUNTY
		2 6 SEP 2025
-		PUBLIC FI DEL
		ABERCAVE ATO

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name/organisation name/name		, Chairman,
of body you represent (see note 3)		Pegasus Court Residents Association
Organisation name/name of body you		Pegasus Court Kiesidets Tssaution
represent (if appropriate) (see note 3)		
Postal and email address Flak 22		Tan House, Mill Street, Pegosus Cowle
	,	Abergavenny, NP7 5EX
		NP7 SEX
Contact telephone number		
Name of the premises you are	making	Pughes Kitchen Garden
a representation about		
Address of the premises you a	re	Mill Street, Abergavenny
making a representation about		
		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		
Public safety		
To prevent public nuisance		
10 prevent public litisance		Specifically, the residents
		of Pregorie Court Mill Street
		of Regards Court Mill Street,
To protect children from		0
harm		<i>.</i>
i i		MONMOUTHSHIRE
		COLINIY
		CONNO.
Please suggest any conditions	that	0 3 OCT 2025
could be added to license to re		Ministration depends - Astronomy
your representation or other	ouy	PUBLIC PROTE: JON
suggestions you would like the		ABERGAVENNY (FFICE
Licensing Sub committee to tal	ke into	
account. **		
Signad:		Date: 2/10/2025 ditaonal information sent
Signed:		Date: 2 10 2025
Plenne see	- ada	literal information sent
\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		7
y enailt	0 7	- Knd 1
-		

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.







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. ABERCHNEN	
Contact telephone number			
Name of the premises you are a representation about	making	PUGHS' GARDEN KITCHEN .	
Address of the premises you making a representation about		7-9 MILL STREET, ABERGAVENNY	
Your representation must rela	ite 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	N0		
		- Ty	
To prevent public nuisance	YES	Noise! Music & Traffic lake on three nights - Close to Residential flats	
To protect children from harm	N0		
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

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Signed:

Your name		
Organisation name/name of b	ody you	
represent (if appropriate) (see	note 3)	
Postal and email address		MATZ PECASUS COLVET, WILL STREET MORCAVERNY, CHEAT, NPT SEX
		MERCHVERNY, CHENT, NPT SEX
Contact telephone number		
Name of the premises you are	makina	PUGHS' GARDEN KITCHEN
a representation about	making	FOORS GARDEN KITCHEN
Address of the premises you a making a representation about	are t	7-9 MILL STREET, ABERGAVENNY
Your representation must relat	te 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	N0	
To provent public mais and		
To prevent public nuisance	YES	See lepresention form for R. Dichadson dated
To protect children from narm	N0	October 17 M
Please suggest any conditions	that	Alcohol and music license to be valid only until
could be added to license to remedy your representation or other suggestions you would like the Licensing Sub committee to take into account. **		6.00pm Monday to Sunday inclusive.
igned:		Date: 0kg016n 25 202

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name		
Organisation name/name of b	ody you	
represent (if appropriate) (see note 3)		
Postal and email address		3 Pegnens Court ABERGAUCHNELL NP75EX
		12 12 12 12 12 12 12 12 12 12 12 12 12 1
		MPT SEX
Contact telephone number		INT TO SE
Name of the premises you are	making	PUGHS' GARDEN KITCHEN
a representation about		
Address of the premises you		7-9 MILL STREET, ABERGAVENNY
making a representation abou	ıt	
Your representation must rela	te to one	of the four Licensing Objectives (see note 4)
Licensing Objective	Yes or	Please detail the evidence supporting your
	No	representation or the reason for your
		representation. Please use separate sheets if
		necessary
To prevent crime and	NO NO	
disorder		
D. 1.11		
Public safety	N0	
To prevent public nuisance	YES)	
10 provone pasmo naisance		To dredent adstraral Novethern al ready land
		M- Wen + O + O adu les al
		March or yearn come
To protect children from	NO	
harm		
Please suggest any senditions	Alana 1	Alaskal and mark live at the second
Please suggest any conditions		Alcohol and music license to be valid only until
could be added to license to remedy your representation or other		6.00pm Monday to Sunday inclusive.
suggestions you would like the		l I
Licensing Sub committee to ta		
	ve niro	

24/10/25

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made I	oy an Othe	er Person
Your name		
Organisation name/name of trepresent (if appropriate) (see		
Postal and email address		flat 4, Pegasus Court Mill Street, Abergovery. NP 75EX
Contact telephone number		
Name of the premises you are a representation about	making	PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about		7-9 MILL STREET, ABERGAVENNY
Your representation must rela	ite to one	of the four Licensing Objectives (see note 4)
Licensing Objective Yes or No		
To prevent crime and disorder	N0	

Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets it necessary
N0	
NO NO	
YES	See Representation for from R. Richardson dolled 17th October
N0	
	NO 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.
---	---

Signed:

Date: 20/10/2025

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name		
Organisation name/name of represent (if appropriate) (se		
Postal and email address		5 Pegasus Court, Mill Street Abergarenny NP7 5EX
Contact telephone number		
Name of the premises you are a representation about	e making	PUGHS' GARDEN KITCHEN
Address of the premises you making a representation about		7-9 MILL STREET, ABERGAVENNY
Your representation must rela	ate 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 mapping princh
To protect children from harm	NO	mappropriate
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: 21/10/25

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name

body you ee note 3)	
	6 Pegasus Court Mile Street, Abergan cury NF
	Mill Street, Abergan enry NPT
re making	PUGHS' GARDEN KITCHEN
are out	7-9 MILL STREET, ABERGAVENNY
late to one	of the four Licensing Objectives (see note 4)
Yes or No	Please detail the evidence supporting your representation or the reason for your representation. Please use separate sheets if necessary
NO	
N0	
YES	The Surener will subject me to Unacceptable level of noise from both music being played at the venue and
2	additional release parking in thill screet
s that emedy	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
ne ake into	
	re making are out late to one Yes or No NO YES

Signed:

Date: 21 37 october 2025

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Vaus marra		
Your name		
Organisation name/name of body you		Flat 9 Pres agen Court Mill SV.
represent (if appropriate) (see note 3)		Abraum NP7 SEX
Postal and email address		() /.
Contact telephone number		
Contact telephone framber		
Name of the premises you are a representation about	making	PUGHS' GARDEN KITCHEN
Address of the premises you a making a representation about		7-9 MILL STREET, ABERGAVENNY
Your representation must relat	e 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	N0	
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	N0	
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:

22/10/25

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by	an Othe	er Person
Your name		-
Organisation name/name of boo represent (if appropriate) (see n	dy you note 3)	
Postal and email address		10 Pegasus Court NP7 SEX
Contact telephone number		
Name of the premises you are n a representation about	naking	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

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 NO	
To prevent public nuisance	YES	I am concerned about noise at 10,11pm
To protect children from harm	NO	

Please suggest any conditions that could be added to license to remedy	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
	9 pm Thusday - Sahrday

Signed:

Date: 22.10-25

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 ∀£3	representation or the reason for your
To prevent crime and disorder	NO Yés	
Public safety	NO Y≥S	
To prevent public nuisance	YES	See Representation form from R.D. indeson destude 17th 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.
---	---

Signed:

Date: 22, 10.25

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name		
Organisation name/name of represent (if appropriate) (se	body you e note 3)	
Postal and email address		15 Pegasus Cont Huskell Abegadeny ND7 5EY
Contact telephone number		The gas and tot 1 SEY
Name of the premises you ar a representation about	_	PUGHS' GARDEN KITCHEN
Address of the premises you making a representation abo	are ut	7-9 MILL STREET, ABERGAVENNY
Your representation must rel	ate 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	N0	
To prevent public nuisance	YES	The license will subject me to unacceptable levels of noi from both music being playing at the vene and additional
To protect children from narm	No	at the vene and additional illegal perking in that Street
Please suggest any conditions that could be added to license to remedy our representation or other suggestions you would like the licensing Sub committee to take into		Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.

Signed:

account. **

Date: 2150 ctober 2025

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

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	N0	
Public safety	N0	
To prevent public nuisance	YES	CONCERNED ABOUT LATE NIGHT DRUNKEN BEHAULOUR AND UNAUTHORISM
To protect children from harm	N0	USE OF OUR PRIVATE CAR PARVE

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	Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.
account. **	

Signed:

Date: 24/10/25

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name			
Organisation name/name of represent (if appropriate) (se	body you ee note 3)	to legeous move	
Postal and email address Contact telephone number Name of the premises you are making a representation about Address of the premises you are making a representation about		20, Regards Coult La ofter Felt 21 Hothskey in Road Abergarency NOT 72 G Mexico	
		(wext feed mos	
		PUGHS' GARDEN KITCHEN	
		7-9 MILL STREET, ABERGAVENNY	
Your representation must rel	ate 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 for from R. Dicholan david 17th October	
To protect children from harm	NO NO	- O deold	
Please suggest any conditions that could be added to license to remedy your representation or other		Alcohol and music license to be valid only until 6.00pm Monday to Sunday inclusive.	

presentation or other stions you would like the ing Sub committee to take into it. **

Signed:

Date: 24th Oct 2025

estro

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

Your name		
Organisation name/name of be represent (if appropriate) (see		The state of the s
Postal and email address Contact telephone number Name of the premises you are making a representation about		21 PEGASAS CAT
		MILL ST ARRASAURANY ND756
		7, 103,00 1,000
		PUGHS' GARDEN KITCHEN
Address of the premises you are making a representation about		7-9 MILL STREET, ABERGAVENNY
Your representation must relat	e 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	N0	
Public safety	N0	
To prevent public nuisance	YES	Deer Representation for from R.D. involsor dated 174 October
To protect children from harm	N0	
		1
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

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 Contact telephone number		I No.	
		23 RAUSUS CONPI	
		23 REUSUS COURT MILL ST. ABERCAVENNY.	
		The di Morrestorio.	
Name of the premises you ar	o mokina	DUCKS CARREN WITOURN	
Name of the premises you are making a representation about Address of the premises you are making a representation about		PUGHS' GARDEN KITCHEN	
		7-9 MILL STREET, ABERGAVENNY	
Your representation must rel	ate 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	N0		
Public safety	NO NO		
To prevent public nuisance	YES	Institably on "proste car. Fack will we used more last destribuse of n	
To protect children from harm	NO	THE MESS SECTION AND AND AND AND AND AND AND AND AND AN	
Diagon suggest serves and			
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.

REPRESENTATION FORM FROM OTHER PERSONS

This representation is made by an Other Person

F		
Your name		
Organisation name/name of I		
represent (if appropriate) (se	e note 3)	ļ,,,,
Postal and email address		WILL STREET MELLE X WILL STREET NEILE YOU AHOO.
Contact telephone number		3
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
		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 for for Reliandson delved 1740 ctds
To protect children from harm	N0	
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

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 Contact telephone number Name of the premises you are making a representation about Address of the premises you are making a representation about		28 Pegasus Cont, Mill Street, Discourse		
			NP7-50/	
		PUGHS' GARDEN KITCHEN 7-9 MILL STREET, ABERGAVENNY		
			Your representation must rel	ate to one
		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	N0			
Public safety	N0			
To prevent public nuisance	YES	Nobe nuvare		
To protect children from harm	NO 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.		
181				

Signed:

Date: 22-10-25