

Application History

7/31/2025 10:18:4 am - Application started
7/31/2025 10:19:52 am - Status Update: SubmitStart
7/31/2025 10:19:53 am - Created project HTR-13022 in PDox
7/31/2025 10:19:53 am - Status Update: Complete
7/31/2025 10:19:52 am - Application submitted

Request Name: Removal of (8) heritage trees to accommodate the ADUs proposed under Permit #BLDG25

Heritage Tree Removal Permit Application

Project Information

COMPLETE

Address information is verified using the City of Mountain View's address database, which can be accessed using the [City's online GIS](#). If your address does not appear after typing in the address numbers, please contact the Mountain View Building Division at 650-903-6313. Please note: Street directions are abbreviated (e.g. West = W) and no punctuation is included (e.g. 500 W Castro St.)

Project Address * 151 Calderon Ave

REQUIRED: Address must be entered and selected from the dropdown list to populate all required address fields. If all required address fields are not populated, the application will not be accepted.

Project City * Mountain View

Project State * CA

Project Zip Code * 94041

Project Assessor Parcel Number 15833009

Heritage Tree Removal Information

COMPLETE

Property Type * Multi-Family Residential Property

Where is the Heritage Tree(s) located on the property? * On private property

Number of Trees Proposed to be Removed * More Than 4

Please include tree information in an arborist uploaded with your application submission.

Tree Replanting Information

COMPLETE

No. of Trees Proposed to be Replanted *

0

The City's standard replacement requirement is 2 new trees for every 1 heritage tree removed. An in-lieu fee may be authorized if replacement is not feasible.

Estimated Time to Plant Replacement Trees (following permit approval) *

Tied to timing of construction project



Property Owner Information

INCOMPLETE

☐ Property Owner is logged in as current user.

First Name *

AvalonBay

Last Name *

Communities, Inc.

Address *

151 Calderon Ave

Address (Continued)

City *

Mountain View

State *

CA

Zip Code *

94041

Email

Phone Number *

Applicant Information

COMPLETE

☒ Applicant is current logged in user.

Applicant First Name *

Riley

Applicant Last Name *

Van Eyck

Applicant Phone Number *

Applicant Email Address *

Applicant Address *

Applicant Address (Continued)

Applicant City *

San Francisco

Applicant State *

CA



Applicant Zip Code *

94129

Signature

INCOMPLETE

I hereby declare that I have read and understood the above information, and:



I acknowledge that:

1. I understand and agree that clicking on the box above identifies that I am the authorized applicant, as designated by the property owner(s), on this permit;
2. I hereby declare, under penalty of perjury, that the information stated on forms, plans, documents, and other materials submitted herewith in support of the application is true and correct to the best of my knowledge; and
3. It is my responsibility to inform the City, through the staff assigned to my permit, of any changes to information represented in this application submittal, including subsequent submittals, in a timely fashion.

Applicant: Riley Van Eyck

Signature date: 2025-07-31 10:19 AM

Payment Details

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