



7/28/25

CITY OF OCALA - EAST OCALA REDEVELOPMENT AREA RESIDENTIAL PROPERTY IMPROVEMENT GRANT APPLICATION

(Completed application and all required attachments must be submitted)

PROJECT INFORMATION

Project Name: TC Opportunity IV, LLC
Project Address: 1122 NE 9th St Ocala FL 34420
Parcel Number: 2614-016-007

APPLICANT INFORMATION

Applicant's Name: TC Opportunity IV, LLC
Name of person to receive all correspondence if different from applicant:
Robert J Jenkins Jr
Agent's Name (if applicable): _____
Agent's Mailing Address: 1525 NE 8th Ave
City: Ocala State: FL Zip: 34420
Phone number: 352-414-1645 Fax: _____
E-mail address: Storage1@neighborhoodstorage.com
How long have you owned / lived at the current location? March 2025

PROJECT DESCRIPTION:

If necessary, attach additional sheets addressing the following:

Explain the purpose of and need for the proposed improvements.

Insulation and window install will make the property
and building more energy efficient and affordable. Fencing
will provide an aesthetically appealing alternative to
chain link in this residential neighborhood.



Would the proposed improvements be made without the assistance of the grant program? If not, please explain.

No. without the grant this project would be cost prohibitive.

PROJECT COSTS & SCHEDULE

Estimated cost of project based on attached submitted low bid.

\$20,851.19

Required -- Attach itemized bid sheets.

How much funding assistance are you requesting?

Anticipated start date: July 2025
September 2025?

Anticipated completion date: October 2025?
November 2025?



GENERAL CONDITIONS

It is expressly understood and agreed that the applicant shall be solely responsible for all safety conditions and compliance with all safety regulations, building codes, ordinances, and other applicable regulations.

It is expressly understood and agreed that the applicant will not seek to hold the City of Ocala, the Grant Review Committee (Committee) and/or its agents, employees, board members, officers and/or directors liable for any property damage, personal injury, or other loss relating in any way to the Program.

It is expressly understood and agreed that the applicant will hold harmless the City, its agents, officers, employees and attorneys for all costs incurred in additional investigation or study of, or for supplementing, redrafting, revising, or amending any document (such as an Environmental Impact Report, specific plan, or general plan amendment) if made necessary by said proceeding and if the applicant desires to pursue such approvals and/or clearances, after initiation of the proceeding, which are conditioned on the approval of these documents.

The applicant authorizes the City of Ocala to promote any approved project including but not limited to displaying a sign at the site, during and after construction, and using photographs and descriptions of the project in City of Ocala materials and press releases.

If the applicant fails to perform the work approved by the Committee, the City reserves the right to cancel the grant. The applicant also understands that any work started/completed before the application is approved by the Committee is done at their own risk, and that such work will jeopardize their grant award.

Completion of this application by the applicant DOES NOT guarantee that grant monies will be awarded to the applicant.



Applicant

I, IT Opportunity IV, LLC, owner/occupant of building at
1122 NE 9th St Ocala, FL 34470, have read and understand the
terms and conditions of the Program and agree to the general conditions and terms outlined in
the application process and guidelines of the Program.

Signature: _____

Date: 5/27/2025

Property Information – For staff use only

Is the property assessed Marion County property taxes? ☒ Y / ☐ N

Are property taxes paid up to date? ☒ Y / ☐ N

Is the property in condemnation or receivership? Y ☒ N

Is there an active City code enforcement case on the property? Y ☒ N

Is the building on the National Register of Historic Places? Y ☒ N