|  | | | | | | | |  | | | | | | | |  | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **FORM 9** | | | | | | | | | | | | | | | | | | | |
| **CERTIFICATE OF SUBSTANTIAL PERFORMANCE OF THE  CONTRACT UNDER SECTION 32 OF THE ACT**  *Construction Act* | | | | | | | | | | | | | | | | | | | |
| **Ottawa** | | | | | | | | | | | | | | | | | | | , |
| (County/District/Regional Municipality/Town/City in which premises are situated) | | | | | | | | | | | | | | | | | | |  |
| **Happy Goat Kiosk, 1611 Scott St. Ottawa K1Z0C5** | | | | | | | | | | | | | | | | | | | , |
| (street address and city, town, etc., or, if there is no street address, the location of the premises) | | | | | | | | | | | | | | | | | | |  |
| This is to certify that the contract for the following improvement: | | | | | | | | | | | | | | | | | | | |
| **HVAC, electrical, plumbing, soffit, finishing** | | | | | | | | | | | | | | | | | | | |
| (short description of the improvement) | | | | | | | | | | | | | | | | | | | |
| to the above premises was substantially performed on | | | | | | | | | | | **18 Oct 2024** | | | | | | | . | |
|  | | | | | | | | | | | (date substantially performed) | | | | | | |  | |
| Date certificate signed: | | | | | | | **23 Oct 2024** | | | | |  | | | | | | | |
|  | | | | | | | | | | | | |  | |  | | | | |
| (payment certifier where there is one) | | | | | | | | | | | | |  | | (owner and contractor, where there is no payment certifier) | | | | |
| Name of owner: | | | | **HAPPY GOAT LRT CAFE INC.** | | | | | |  | | | | | | | | | |
| Address for service: | | | | | | **33 Laurel Street, Ottawa, K1J2J7** | | | | | | | | | | | | | |
| Name of contractor: | | | | | **HAPPY GOAT LRT CAFE INC.** | | | | | | | | |  | | | | | |
| Address for service: | | | | | | **33 Laurel Street, Ottawa, K1J2J7** | | | | | | | | | | | | | |
| Name of payment certifier (where applicable): | | | | | | | | |  | | | | | | | |  | | |
| Address: | |  | | | | | | | | | | | | | | | | | |
| (Use A or B, whichever is appropriate) | | | | | | | | | | | | | | | | | | | |
| x | A. | | Identification of premises for preservation of liens: | | | | | | | | | | | | | | | | |
|  |  | | **Happy Goat Kiosk, 1611 Scott St. Ottawa K1Z0C5** | | | | | | | | | | | | | | | | |
|  |  | | (if a lien attaches to the premises, a legal description of the premises,  including all property identifier numbers and addresses for the premises) | | | | | | | | | | | | | | | | |
| ☐ | B. | | Office to which claim for lien must be given to preserve lien: | | | | | | | | | | | | | | | | |
|  |  | |  | | | | | | | | | | | | | | | | |
|  |  | | (if the lien does not attach to the premises, a concise description of the premises, including addresses,  and the name and address of the person or body to whom the claim for lien must be given) | | | | | | | | | | | | | | | | |