

ALLEN-HASTINGS LIMITED

FAX

**HEAD OFFICE
28 BIRCH ROAD
R.R.#1
MILLER LAKE, ON
N0H 1Z0**

PHONE: 519-795-7782

FAX: 519-795-7388

TO: Construct Connect Canada

DATE: November 13, 2024

FAX NUMBER: 905 752-5450

FROM: Laura Hastings

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**SUBJECT: Kincardine District Senior
School**

Could you please publish the attached certificate of substantial completion and bill to the address above. Thank you.

Sincerely



Laura Hastings

FORM 9
CERTIFICATE OF SUBSTANTIAL PERFORMANCE OF THE
CONTRACT UNDER SECTION 32 OF THE ACT

Construction Act

Bruce County/Town of Kincardine

(County/District/Regional Municipality/Town/City in which premises are situated)

885 River Ln, Kincardine, ON N2Z 2B9

(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:

Kincardine District Senior School - Deluge Showers

(short description of the improvement)

to the above premises was substantially performed
on

October 31, 2024

(date substantially performed)

Date certificate signed: **November 13, 2024**



(payment certifier where there is one)

(owner and contractor, where there is no payment certifier)

Name of owner: **Bluewater District School Board**

Address for service: **351 1st Ave N, Chesley, ON N0G 1L0**

Name of contractor: **Allen-Hastings Limited**

Address for service: **28 Birch Rd RR #1, Miller Lake, ON N0H 1Z0**

Name of payment certifier (where applicable): **Michael Demaiter, P.Eng.**

Address: **55 Northland Road, Waterloo, ON N2V 1Y8**

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

885 River Lane, Kincardine, ON N2Z 2B9

(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)