

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

*Construction Act*

**Hastings County**

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

**27 Wellington St, Madoc ON**

(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:

**Installation of new windows in a 15 unit residential apartment building**

(short description of the improvement)

to the above premises was substantially performed on **October 30, 2024**

(date substantially performed)

Date certificate signed: **November 26, 2024**



(payment certifier where there is one)

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

Name of owner: **Corporation of the County of  
Hastings - Facilities Dept**

Address for service: **228 Church St, Postal Bag 6300 Belleville ON K8N 5E2**

Name of contractor: **Trust Windows Corp**

Address for service: **375 Canarctic Drive, Toronto ON M3J 2P9**

**Corporation of the County of  
Hastings - Facilities Dept -  
Graeme Tubbs**

Name of payment certifier (where applicable):

Address: **228 Church St, Postal Bag 6300 Belleville ON K8N 5E2**

(Use A or B, whichever is appropriate)

☐ A. Identification of premises for preservation of liens:

(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:

**228 Church St, Postal Bag 6300 Belleville ON K8N 5E2**

(if the lien does not attach to the premises, the name and address of the person or body to whom the claim for lien must be given)