

December 6, 2024  
Our File No.: 31489-010

**VIA: E-MAIL** [toby@tjlconstruction.ca](mailto:toby@tjlconstruction.ca)

Toby Racine, P.Eng.  
Project Manager / Estimator  
TJL Construction Ltd.  
4554 Anderson Road  
Carlsbad Springs, ON K0A 1K0

Dear Toby Racine:

**Re: Certificate Of Substantial Performance  
Britannia Water Purification Plant - Valve Chamber A Slab Replacement  
2731 Cassels Street, Ottawa, ON K2B 1A8**

Please find enclosed a copy of the certificate of substantial performance (Form 9) for the above noted project. Please arrange for publication in a construction trade newspaper as per Ontario Reg. 304/18 within seven days of receipt of this letter and send proof of publication once it is received.

Along with proof of publication, submit an application for payment of the lien holdback amount, an up to date WSIB certificate, an up to date Statutory Declaration, and updated proof of insurance for the warranty period along with any other documentation noted in the Contract Documents.

Best Regards,

J.L. RICHARDS & ASSOCIATES LIMITED

Brad Gillies, M.Eng., P.Eng.  
Associate, Senior Structural Engineer

BG:bg

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

*Construction Act*

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

\_\_\_\_\_  
(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:

\_\_\_\_\_  
(short description of the improvement)

to the above premises was substantially performed on \_\_\_\_\_ .  
(date substantially performed)

Date certificate signed: \_\_\_\_\_

\_\_\_\_\_  
(payment certifier where there is one - signature required)

\_\_\_\_\_  
(owner and contractor, where there is no payment certifier -  
signatures required)

Name of owner: \_\_\_\_\_

Address for service: \_\_\_\_\_

Name of contractor: \_\_\_\_\_

Address for service: \_\_\_\_\_

Name of payment certifier (where applicable): \_\_\_\_\_

Address: \_\_\_\_\_

(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:

\_\_\_\_\_  
(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)