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

Construction Act

01-01-00-00-00-
CITY OF BARRIE (County/District/Regional Municipality/Town/City in which premises are situated)
(County/District/Regional Multicipality/Townson)
LOCK HART ROAD & THICKETWOOD AVENUE. (street address and city, town, etc., or, if there is no street address, the location of the premises)
(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:
UNDERCAKOUND DISTRIBUTION AND STREETHING SYSTEM. (short description of the improvement)
to the above premises was substantially performed on
Date certificate signed: DE. 18/2024
(April
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: BARRIE LOWHART ROAD GP INC. Address for service: 3700 STEELES ANE. WEST, SUITE 800 VANGHAND ON.
Name of contractor: 1RANS POWER 14L 8M9.
Address for service: 585 APPLEWOOD CRO. CONCORD, ON. L4K 5V7
Name of payment certifier (where applicable):MOONMATZLTD .
Address: 2902 SOUTH SHEKIDAN WAY-SUITE 300 OAKVILLE, OF
(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens: EUCRWEL PARCI — LOCKHART RD & THICKETWOOD ANG (if a lien attaches to the premises, a legal description of the premises, is destricted attaches to the premises and addresses for the premises)
(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 lies does not ottach to the examises, the name and address of the person or hady to whom the claim for lien must be given)

CA-9-E (2018/04)

