

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

**City of Thorold**

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

**Pine Street**

(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:


**Pine Street Sanitary Sewer Replacement and Road Reconstruction Phase 1 (Oct. 7<sup>th</sup>, 2024 - Dec. 20<sup>th</sup>, 2024)**

(short description of the improvement)

to the above premises was substantially performed on **December 20<sup>th</sup>, 2024**

(date substantially performed)

Date certificate signed: **February 11, 2025**

  
(payment certifier where there is one)

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

**The Corporation of The City of**

Name of owner: **Thorold**

Address for service: **3540 Schmon Parkway, Thorold ON, L2V 4A7**

**Provincial Construction (Niagara**

Name of contractor: **Falls) Limited**

Address for service: **4382 Montrose Rd, Niagara Falls, ON L2H 1K2**

**Urban & Environmental**

Name of payment certifier (where applicable): **Management Inc**

Address: **4701 St. Clair Avenue, Niagara Falls, ON L2E 3S9**

(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:

**3540 Schmon Parkway, Thorold ON, L2V 4A70**

(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)