

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

Construction Act

Essex County

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

1624 Howard Ave., Unit #7, Windsor ON N8X 3T7

(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:

Interior fit-up for a new pediatric dental clinic (Sprout Kids Dentistry)

(short description of the improvement)

to the above premises was substantially performed

March 5, 2025

(date substantially performed)

on Date certificate signed: March 6, 2025

n/a

(payment certifier where there is one)



RTP Construction Inc.

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



Dr. Arleen Schmidt

Name of owner: Dr. Arleen Schmidt

Address for service: 1624 Howard Ave. Unit #7, Windsor ON N8X 3T7

Name of contractor: RTP Construction Inc.

Address for service: 929 Shepherd St. E., Windsor ON N8X 2L4

Name of payment certifier (where applicable): Address: n/a

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

1624 Howard Ave. Unit #7, Windsor ON N8X 3T7

(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)