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

Construction Act

| Town of St. Marys |
|---|
| (County/District/Regional Municipality/Town/City in which premises are situated) |
| 408 James Street South, Box 998, St. Marys, ON N4X 1B6 |
| (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: |
| Wellington Street Reconstruction |
| (short description of the improvement) |
| to the above premises was substantially performed on <u>January 1, 2025</u> . (date substantially performed) |
| Date certificate signed: March 18, 2025 |
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| (payment certifier where there is one) (owner and contractor, where there is no payment certifier) |
| Name of owner: <u>Town of St. Marys</u> Address for service: <u>408 James Street South, Box 998, St. Marys, ON N4X 1B6</u> |
| |
| Name of contractor: Omega Contractors Inc. |
| Address for service: 4104 Breck Avenue, London, ON N6L 1B5 |
| B. M. Ross and Associates Name of payment certifier (where applicable): Limited |
| Address: 62 North Street, Goderich, ON N7A 2T4 |
| (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:

Town of St. Marys, 408 James Street South, Box 998, St. Marys, ON N4X 1B6

(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)