

**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:

Contract Dated 26th February 2024 for CONCRETE WORKS (Footings/Foundations/Slab on Grade, Erecting Precast Stairs & Landings)

\_\_\_\_\_  
(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:  
PART LOT 177 STAMFORD, PARTS 1, 2, 3 & 4 ON 59R16789; SUBJECT TO AN EASEMENT OVER PT 2 ON 59R16789 AS IN R0317641; SUBJECT TO AN EASEMENT OVER PT 3 ON 59R16789 AS IN R0317642; SUBJECT TO AN EASEMENT AS IN SN693064; CITY OF NIAGARA FALLS  
(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)