

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

.....  
(County/District or Regional Municipality in which premises are situate)

.....  
(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:

.....  
(short description of the improvement)

to the above premises was substantially performed on .....  
(date substantially performed)

Date certificate signed: .....

.....  
Name of Payment Certifier

*Doug Brown*  
.....  
Signature of Payment Certifier

Name of owner .....

Address for service .....

Name of contractor .....

Address for service .....

Name of payment certifier .....

(where applicable)

Address .....

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:

.....  
(If a lien does not attach to a premises, the name and address of the person or body to whom the claim for lien must be given)

