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

Construction Act

CITY OF ST. CATHARINES, ONTARIO	
(County/District/Regional Municipality/Town/City in which premises are situated)	
57 Carlisle St., St. Catharines, Ontario	
(street address and city, town, etc., or, if there is no street address, the location of the premis	ses)
This is to certify that the contract for the following improvement:	
Drywall Installation	
(short description of the improvement)	
to the above premises was substantially performed on June 05,2025	*
(date substantially performed)	-
Date certificate signed: JUNE 16/2025	
(payment certifier where there is one) (owner and contractor, where the	ere is no payment certifier)
Address for service: 57 Carslie St, St Catharines, Ontario Name of contractor: Mazzad Drywall Inc.	
Address for service: 21 Parr Blvd , Bolton, On	
Name of payment certifier (where applicable):	is a second
Address:	
(Use A or B, whichever is appropriate)	
A. Identification of premises for preservation of liens:	
57 Carslie St. St Catharines	
(if a lien attaches to the premises, a legal description of the premises, including all property identifier numbers and addresses for the premises	5)
B. Office to which claim for lien must be given to preserve lien:	
	D+1

(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)