

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

Town of Orangeville

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

100 Rolling Hills Drive , Orangeville, ON

(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:


RFP Roof Replacement Project-Section F. Option 2, Quote#7-Rev.#2

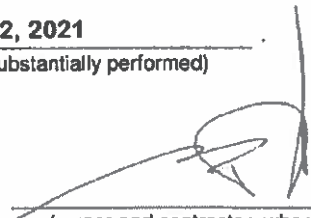
(short description of the improvement)

to the above premises was substantially performed on **March 22, 2021**

(date substantially performed)

Date certificate signed: **April 8, 2021**


(payment certifier where there is one)


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

Name of owner: **Headwaters Health Care Centre**

Address for service: **100 Rolling Hill Drive, Orangeville, ON L9W 4X9**

Name of contractor: **Triumph Roofing & Sheet Metal Inc.**

Address for service: **1 Connie St, Toronto, ON M6L 2H8**

Name of payment certifier (where applicable): **N/A**

Address: _____

(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:

Headwaters Health Care Centre, 100 Rolling Hill Drive, Orangeville, ON L9W 4X9

(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)