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

Construction Act

THE CORPORATION OF THE CITY OF BRANTFORS
(County/District/Regional Municipality/Town/City in which premises are situated)
58 SALHOUSIE STREET, BRANTFORN, ON N3T 2 J2 (street address and city, town, etc., or, if there is no street address, the location of the premises)
(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:
BRANT'S CROSSING BRIDGE MINOR REHABILITATION
(short description of the improvement)
to the above premises was substantially performed on <u>becember</u> 3, 2021 (date substantially performed)
Date certificate signed: December 7, 2021
Mint West.
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner:
Name of contractor: FULL CIRCLE /WAUSTRIAL SOLUTIONS INC.
Address for service: 5795 DON MURIE STREET, NIAGARA FALLS, ON L2G DA9
Name of payment certifier (where applicable): MATI HOW WELSH
Address: 58 NALHOUSIE STREET, BRANTFORD, ON NOT 2J2
(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:
THE CITY OF BLANTFOLY 58 YAL HOUSIE STREET, BLANTFOLY ON N3T 252 (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)