

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

Construction Act

Smiths Falls Ontario

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

1 Hershey Drive Smiths Falls Ontario

(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:

Co2 Annex Room Renovation including adding exhasut fan and electrical work

(short description of the improvement)

to the above premises was substantially performed on **November 30, 2021**

(date substantially performed)

Date certificate signed: **December 6, 2021**

(payment certifier where there is one)

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

Name of owner: **Tweed Inc.**

Address for service: **1 Hershey Drive Smiths Falls Ontario**

Name of contractor: **Buttcon East Limited.**

Address for service: **4043 Carling Avenue, Ottawa Ontario**

Name of payment certifier (where applicable): **Tweed Inc.**

Address: **1 Hershey Drive Smiths Falls Ontario**

(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:
1 Hershey Drive Smiths Falls, Ontario K7A 0A8

(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)

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)

(short description of the Improvement)

(date substantially performed)

(payment certifier where there is one)

Digitally signed by Michael
Sauter
DN: cn=Michael,
email=michael.sauter@univie.ac.at,
c= Austria, ou=University of Vienna
Date: 2010.11.08
14:44:16 +0100

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

Address: _____

(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)