

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

Construction Act

CORNWALL ONTARIO

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

1330 OPTIMUM DRIVE ,CORNWALL 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:

DISTRIBUTION CENTER GUARDHOUSE ,SCALE ,GATES

(short description of the improvement)

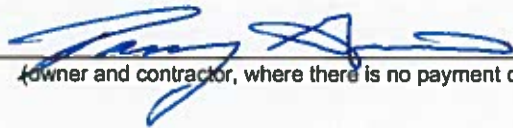
to the above premises was substantially performed on **NOVEMBER 18 2021**

(date substantially performed)

Date certificate signed: **December 14th 2021**



(payment certifier where there is one)



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

Name of owner: **LOBLAWS INC**

Address for service: **400 AV SAINTE CROIX ,SUITE 10 ,SAINT LAURENT ,MONTREAL,H4N 3L4**

Name of contractor: **TRISELECT CONSTRUCTION INC.**

Address for service: **9590 boul. HENRI BOURASSA EAST SUITE 205 .MONTREAL QUE. H1E 2S4**

Name of payment certifier (where applicable):

Address:

(Use A or B, whichever is appropriate)

- ☒ A. Identification of premises for preservation of liens:
LOBLAWS INC 400 AV SAINTE CROIX ,SUITE 10,SAINT LAURENT MONTREAL,QUE. H1E 2S4

(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 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)