

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

Municipality of Chatham	n-Kent	
	(County/District or Regional Municipali	ty in which premises are situate)
325 Margaret Ave., Wal	laceburg, ON N8A 2A7	
(Street add	ress and city, town, etc., or, if there is no	street address, the location of the premises)
This is to certify that the contract	t for the following improvement:	
First Floor Renovations	tion the following improvement.	
	(short description of th	e improvement)
to the above premises was substantially performed on February 9, 2022		
to the above premises was subs	stantially performed on	(date substantially performed)
Date certificate signed: February 9, 2022		ROA studio inc.
		Name of Payment Certifier
		(Vang Banus)
		Signature of Payment Certifier
Name of owner	Chatham-Kent Health Alliance	
Address for service	80 Grand Ave. West, Chatham, N7L 1B7	
	· · · · · · · · · · · · · · · · · · ·	
Name of contractor	Elric Contractors of Wallaceburg Limited	
	4400 B # : A W II	
Address for service	1436 Dufferin Ave., Wallaceburg, ON N8A 2W5	
Name of payment certifier	ROA studio inc.	
	(where appli	cable)
Address	67 King Street West, Chatham, ON N7M 1C7	
Addioso		
A Identification of premise	s for preservation of liens:	
(If a lien attaches to the premises, a lega		Hospital- Roll# 365044100208800000 all property identifier numbers and addresses for the premises) ien:

(If a lien does not attach to a premises, the name and address of the person or body to whom the claim for lien must be given)

