



CERTIFICATE OF SUBSTANTIAL PERFORMANCE
Form 9

Niagara Falls, Ontario

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

6730 Kalar Rd, Niagara Falls, ON L2H 2T5

(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:

Wood Cladding Replacement

(short description of the improvement)

to the above premises was substantially performed on

August 25th 2022

(date substantially performed)

Date certificate signed: September 25th 2022

(payment certifier where there is one)

Mahad Mohamed

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

Name of Owner

Falls Place Co-operative Homes Inc

Address for Service

6730 Kalar Rd, Niagara Falls, ON L2H 2T5 Unit 52

Name of Contractor

Registon Building Restoration Inc.

Address for Service

1520 Trinity Dr Unit #8, Mississauga, ON L5T 1N9

Name of Payment

Cion Corp.

Certifier

(where applicable):

Address

920 Brant St Suite 22, Burlington, ON L7R 4J1

(Use A or B whichever is appropriate)

A. Identification of premises for preservation of liens:

Falls Place Co-operative Homes Inc.

(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)