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

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 descrip	ption of the improvement)
to the abov	e premises was substantially performed on	·
		(date substantially performed)
Date certific	cate signed:	
	marten	
(payment o	certifier where there is one - signature required)	(owner and contractor, where there is no payment certifier - signatures required)
Name of ov	vner:	
Address for	service:	
Name of co	ntractor:	
Address for	service:	
Name of pa	yment certifier (where applicable):	
Address:		
(Use A or B, v	whichever is appropriate)	
□ A.	Identification of premises for preservation of	liens:
-	(if a lien attaches to th including all property ide	e premises, a legal description of the premises, entifier numbers and addresses for the premises)
B. Office to which claim for lien must be given to preserve lien:		o preserve lien:
-	(if the lien does not attach to the premises, the name	e and address of the person or body to whom the claim for lien must be given)