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

Construction Act

| Region of Niagara | |
|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| (County/District/Regional Municipali | ty/Town/City in which premises are situated) |
| 3274 Netherby Road, Fort Erie, ON (Stevensvill | e-Douglastown Lagoon Facility) |
| (street address and city, town, etc., or, if the | re is no street address, the location of the premises) |
| This is to certify that the contract for the following improve | ement: |
| Cell No. 2 Rehabilitation (Contact 2021-T-6) | |
| (short description of the improvement) | |
| to the above premises was substantially performed on | December 21, 2022 |
| | (date substantially performed) |
| Date certificate signed: January 11, 2023 | |
| Jonatha Nog | |
| (payment certifier where there is one) | (owner and contractor, where there is no payment certifier) |
| Name of owner: Region of Niagara Address for service: 1815 Sir Isaac Brock Way, Th | orold, ON, L2V 4T7 |
| Name of contractor: Greenspace Construction Inc. | |
| Address for service: 50 Carroll St., Toronto, ON | |
| Name of payment certifier (where applicable): Jonatha | n Noga |
| Address: 500-5935 Airport Road, Mississauga, C | |
| (Use A or B, whichever is appropriate) | |
| A. Identification of premises for preservation of li | iens: |
| · | e premises, a legal description of the premises, ntifier numbers and addresses for the premises) |
| B. Office to which claim for lien must be given to | preserve lien: |
| | ck Way, P.O. Box 1042, Thorold, ON, L2V 4T7 |
| (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) | |