

# FORM 9

## CERTIFICATE OF SUBSTANTIAL PERFORMANCE OF THE CONTRACT UNDER SECTION 32 OF THE ACT

*Construction Act*

**The corporation of the County of Lambton**

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

**Town of Plympton-Wyoming, Township of Warwick, Enniskillen Township and Municipality of Brooke-Alvinston  
(various locations)**

(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:

**Substantial Completion of Project LAM\_03\_BRO-Petrolia to construct and implement high-speed broadband services in the County of Lambton**

(short description of the improvement)

to the above premises was substantially performed on **2023-03-02**

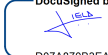
(date substantially performed)

Date certificate signed: \_\_\_\_\_

\_\_\_\_\_  
(payment certifier where there is one)

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

Name of owner: **Southwestern Integrated Fibre  
Technology Inc.**

DocuSigned by:  
  
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Executive Director 8/1/2023

Address for service: **789 Broadway St., Wyomnig, ON N0N 1T0  
Brooke Telecom Co-operative**

Name of contractor: **Ltd.**

Address for service: **3241 Park St., PO Box 40, Inwood, ON N0N 1K0**

Name of payment certifier (where applicable): **N/A**

Address: \_\_\_\_\_

(Use A or B, whichever is appropriate)

☐ A. Identification of premises for preservation of liens:

\_\_\_\_\_  
(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:

**Executive Director Southwestern Integrated Fibre Technology Inc. 789 Broadway St. Wyoming, ON N0N 1T0**

(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)