

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

Construction Act

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

Town of Meaford
(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:

Relining of sewer mains across the town of Meaford (contract # ES-2023-10)
(short description of the improvement)

to the above premises was substantially performed on Sept. 5. 23
(date substantially performed)

Date certificate signed: September 21, 2023

[Signature]
(payment certifier where there is one)

Sept 21-23

[Signature]
(owner and contractor, where there is no payment certifier)

Name of owner: Municipality of Meaford

Address for service: Town of Meaford

Name of contractor: Capital Sewer Services Inc.

Address for service: 31 Keyes Court, Vaughn, ON L4H 4V6

Name of payment certifier (where applicable): _____

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:

Clerk's office, 21 Trowbridge St. W, Meaford ON N4L 1N2

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