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

Construction Act

THE CORPORATION OF THE CITY OF NIAGARA FALLS
(County/District/Regional Municipality/Town/City in which premises are situated)
4310 QUEEN STREET, P. O. BOX 1023, NIAGARA FALLS, ONTARIO, L2E 6X5
(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:
2022 ROAD REHABILITATION & SIDEWALK REPLACEMENT PROGRAM CONTRACT # 2022-568-22
(short description of the improvement)
to the above premises was substantially performed on October 31, 2022 (date substantially performed)
Date certificate signed: October 23, 2023
Lee D'Agestio
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
THE CORPORATION OF THE
Name of owner: CITY OF NIAGARA FALLS
Address for service: 4310 QUEEN STREET, P. O. BOX 1023, NIAGARA FALLS, ONTARIO, L2E 6X5
Name of contractor: SACCO CONSTRUCTION LTD.
Address for service: 4530 DRUMMOND ROAD, NIAGARA FALLS, ON, L2E 6C7
Name of payment certifier (where applicable): CITY OF NIAGARA FALLS
Address: 4310 QUEEN STREET, P. O. BOX 1023, NIAGARA FALLS, ONTARIO, L2E 6X5
(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:
CITY CLERK'S OFFICE, CORPORATION OF THE CITY OF NIAGARA FALLS

(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)