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

Construction Act

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| (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) This is to certify that the contract for the following improvement: | | |
| | | |
| to the above | ve premises was substantially performed on | |
| to the abov | ve premises was substantially performed on | (date substantially performed) |
| Date certifi | icate signed: | |
| 6 | ASherri | |
| (payment | certifier where there is one - signature required) | (owner and contractor, where there is no payment certifier - signatures required) |
| Name of ov | wner: | |
| Address fo | or service: | |
| Name of co | ontractor: | |
| Address for service: | | |
| 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) | | ens: |
| | | □ B. |
| | (if the lien does not attach to the premises, the name a | and address of the person or body to whom the claim for lien must be given) |