

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

Construction Act

OXFORD COUNTY

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

21 REEVE STREET, P.O. BOX 1614, WOODSTOCK, ON, N4S 7Y3

(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 LED Lighting Retrofit - CONTRACT #911006/911007/911008/915040-2022-A
LED Lighting and controls upgrades at various ADMIN, EMS, WATER TREATMENT AND DISTRIBUTION, AND
WASTE WATER TREATMENT AND COLLECTION SITES.

(short description of the improvement)

to the above premises was substantially performed on **OCTOBER 31, 2023**

(date substantially performed)

Date certificate signed: **November 7, 2023**

Melissa L Abercrombie

(payment certifier where there is one)

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

Name of owner: **OXFORD COUNTY**

Address for service: **21 REEVE STREET, P.O. BOX 1614, WOODSTOCK, ON, N4S 7Y3**

Name of contractor: **ARCADIAN PROJECTS**

Address for service: **1439 GINGERICH RD., UNIT B2, BADEN, ON, N3A 3J7**

Name of payment certifier (where applicable): **MELISSA ABERCROMBIE**

Address: **21 REEVE STREET, P.O. BOX 1614, WOODSTOCK, ON, N4S 7Y3**

(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:

AS ABOVE

(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)