

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

*Construction Act*

**The Corporation of the Town of Smiths Falls**

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

**Box. 695, 77 Beckwith Street North, ON K7A 4T6**

(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:

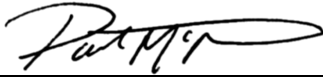
**Contract #2310051- Milling Of Asphalt, Grading, Hot Mix Asphalt And Misc. Concrete ( 2023-PW-07)**

(short description of the improvement)

to the above premises was substantially performed on **November 13, 2023**

(date substantially performed)

Date certificate signed: **November 21, 2023**



(payment certifier where there is one)

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

Name of owner: **Corporation of the Town of  
Smiths Falls**

Address for service: **Box 695, 77 Beckwith Street North, Smiths Falls, ON K7A 4T6**

Name of contractor: **Thomas Cavanagh Construction  
LTD**

Address for service: **9094 Cavanagh Road, Ashton, ON K0A 1B0**

**Paul McMunn, Director of Public  
Works and Utilities, Town of**

Name of payment certifier (where applicable): **Smiths Falls**

Address: **Box 695, 77 Beckwith Street North, Smiths Falls, ON K7A 4T6**

(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:

**Box 695, 77 Beckwith Street North, Smiths Falls, ON K7A 4T6**

(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)