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

Construction Act

The Corporation of the Town of Iroquois Falls
(County/District/Regional Municipality/Town/City in which premises are situated)
Town of Iroquois Falls, Municipal Road (Highway 67)
(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:
Municipal Road (Highway 67) Slope Failure Remediation
(short description of the improvement)
to the above premises was substantially performed on November 30, 2023
(date substantially performed)
Date certificate signed: December 6, 2023
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: The Corporation of the Town of Iroquois Falls  Address for service: 235 Main Street, Iroquois Falls, ON, P0K 1G0 (Town Office)
Name of contractor: C. Villeneuve Construction CO. LTD.
Address for service: 1533 Highway 11 W., PO Box 1720, Hearst, ON, P0L 1N0
Name of payment certifier (where applicable): EXP Services Inc.
Address: 310 Whitewood Avenue W., PO Box 1208, New Liskeard, ON, P0J 1P0
(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:
The Corporation of the Town of Iroquois Falls
(if the lien does not attach to the promises, the name and address of the person or hady to whom the claim for lien must be given)