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

Construction Act

The Corp	oration o	f the City of Niagara Falls	
		(County/District/Regional Municip	ality/Town/City in which premises are situated)
4310 Que	en Street	, PO Box 1023, Niagara Falls, On	tario, L2E 6X5
	,	(street address and city, town, etc., or, if t	here is no street address, the location of the premises)
This is to	certify tha	t the contract for the following impro	ovement:
Contract	2023-519		Reconstruction (Sodom Road to Willoughby Drive)
		(short desc	ription of the improvement)
to the abo	ove premis	ses was substantially performed on	
			(date substantially performed)
Date certi	ificate sign	ned: December 20, 2023	_
	<u> </u>	t certifier where there is one)	(owner and contractor, where there is no payment certifier)
	(раушен	Coertiner where there is one)	(owner and contractor, where there is no payment certifier)
Name of		orporation of the City of iagara Falls	
Address f	for service	: 4310 Queen Street, PO Box 102	23, Niagara Falls, Ontario, L2E 6X5
Name of		Seawaves Development Servic	es
name of o	contractor	ing.	
Address f	for service	PO Box-60581, RPO Mountain	Plaza, Hamilton, ON L9C 7N7
Name of	payment c	ertifier (where applicable): <u>Wendy</u>	Eitzen
Address:	4310 Qu	een Street, PO Box 1023, Niagara	a Falls, ON, L2E 6X5
			,,
(Use A or E	3, whichever	r is appropriate)	
☐ A	A. Identification of premises for preservation of liens:		
			the premises, a legal description of the premises, identifier numbers and addresses for the premises)
⊠ в	City Cle	o which claim for lien must be givenerks Office, Corporation of the Ci DN, L2E 6X5	to preserve lien: ty of Niagara Falls, 4310 Queen Street, PO Box 1023, Niagara

(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)