

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

**The Corporation of the County of Lambton**

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

**St. Clair, County of Lambton (various locations)**

(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:

**Substantial Completion of Project LAM\_07A\_COG to construct and implement high-speed broadband services in the County of Lambton**

(short description of the improvement)

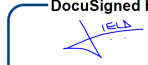
to the above premises was substantially performed on **August 30, 2022**  
(date substantially performed)

Date certificate signed: \_\_\_\_\_

\_\_\_\_\_  
(payment certifier where there is one)

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

Name of owner: **Southwestern Integrated Fibre Technology Inc.**

DocuSigned by:  
 Barry Field 4/16/2024  
D07A870B3EA642B...

Address for service: **789 Broadway St., Wyomnig, ON N0N 1T0**

Name of contractor: **Cogeco Connexion Inc.**

Address for service: **950 Syscon Road, Burlington, Ontario L7R 4S6**

Name of payment certifier (where applicable): **N/A**

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)

B. Office to which claim for lien must be given to preserve lien:

**Executive Director  
Southwestern Integrated Fibre Technology Inc.  
789 Broadway St.  
Wyoming, ON  
N0N 1T0**

(if the lien does not attach to the premises, the name and address of the person or body to whom the claim for lien must be given)