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

Construction Act

| Town of Bo  | owmanville, region of Durham                           |   |  |
|---|--|---|--|
|   | (County/District/Regional Municipali                   | ity/Town/City in which premises are situated  | d)   |
| 1 Holt Rd S   | s, Bowmanville, ON L1C 3Z8                             |   |  |
|   | (street address and city, town, etc., or, if the       | ere is no street address, the location of the   | premises)  |
| This is to cert   | tify that the contract for the following improv        | ement:  |  |
| Shipment, S   | Site Acceptance Testing and Remov                      | al of PHT Pump Motor  |  |
|   |  | tion of the improvement)  |  |
| to the above  | premises was substantially performed on                | larch 4th, 2024   |  |
| 10 1110 00010   | promises was substantially pensimos on                 | (date substantially performed)  | Digitally signed by Brennan Gregory  |
| Date certificate signed: 2024-05-08                         |  | Bu-Hazar Black  | Digitally signed by Brennan Gregory<br>Reason: I am approving this document<br>Location: Osborne Office<br>Date: 2024.05.08 11:59:42-04'00'  |
|   |  | Anoshan Arulraja  | Digitally signed by Anoshan<br>Arulrajan<br>Date: 2024.05.08 11:30:03 -04'00'  |
| (payment certifier where there is one - signature required) |  |   | re there is no payment certifier - es required)  |
|   | er: Ontario Power Generation                           |   | ,  |
|   |  |   |  |
| Address for s   | ervice: 1 Holt Rd S, Bowmanville, ON                   | N L1C 3Z8   |  |
| Name of contractor: Black & McDonald Limited                |  |   |  |
| Address for service: 81 Osborne Road, Bowmanvi              |  | ville, ON L1E 0L1   |  |
|   | ment certifier (where applicable): N/A                 |   |  |
| Address:  |  |   |  |
| (Use A or B, wh   | nichever is appropriate)                               |   |  |
| ·   | lentification of premises for preservation of I        | ione  |  |
| ☐ A. IO   | reminication of premises for preservation of t         | ICHS.   |  |
|   | ,  | e premises, a legal description of the premi<br>entifier numbers and addresses for the pren | The state of the s |
| ✓ B. O  | office to which claim for lien must be given to        | preserve lien:  |  |
| <del></del>   | arlington Nuclear Generating Station                   | •   | N L1C 3Z8.   |
|   | (if the lien does not attach to the premises, the name | e and address of the person or body to whon   | n the claim for lien must be given)  |