

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

*Construction Act*

**REGIONAL MUNICIPALITY OF NIAGARA - TOWN OF NIAGARA-ON-THE-LAKE**

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

**2 WESTWOOD COURT, NOTL, ON**

(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:

**2023-T-79 EMS FLEET RENOVATION PROJECT**

(short description of the improvement)

to the above premises was substantially performed on **MAY 28, 2024**

(date substantially performed)

Date certificate signed: **MAY 28, 2024**



(payment certifier where there is one)

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

Name of owner: **REGIONAL MUNICIPALITY OF NIAGARA**

Address for service: **1815 SIR ISAAC BROCK WAY, PO BOX 1042, THOROLD ON L2V 4T7**

Name of contractor: **DUOMAX DEVELOPMENTS**

Address for service: **3224 CAMPDEN ROAD, VINELAND, ON L0R 2C0**

Name of payment certifier (where applicable): **CIANFRONE ARCHITECT INC.**

Address: **172 JOHN STREET SOUTH, HAMILTON, ON L8N 2C4**

(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:

**REGIONAL MUNICIPALITY OF NIAGARA, 1815 SIR ISAAC BROCK WAY, THOROLD ON L2V 4T7**

(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)