

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

*Construction Act*

**CITY OF OSHAWA, REGIONAL MUNICIPALITY OF DURHAM**

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

**2425 SIMCOE STREET NORTH, OSHAWA, ONTARIO, L1H 7K4**

(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:

**UC TOWER 2 - CONCRETE FORMWORK, CONCRETE PLACING, REBAR PLACING, REBAR ACCESSORIES AND THE SUPPLY AND INSTALL OF PRECAST STAIRS**

(short description of the improvement)

to the above premises was substantially performed on **JULY 4, 2024**

(date substantially performed)

Date certificate signed: July 16/24



(payment certifier where there is one)

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

Name of owner: **TRIBUTE (SIMCOE STREET) LIMITED**

Address for service: **1815 IRONSTONE MANOR, UNIT 1, PICKERING, ONTARIO, L1W 3W9**

Name of contractor: **APPLEWOOD FORMING INC.**

Address for service: **70 EAST BEAVER CREEK ROAD, SUITE 204, RICHMOND HILL, ONTARIO, L4B 3B2**  
**WESTHALL INVESTMENT**

Name of payment certifier (where applicable): **LIMITED**

Address: **1815 IRONSTONE MANOR, UNIT 1, PICKERING, ONTARIO, L1W 3W9**

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

**2425 SIMCOE STREET NORTH, OSHAWA, ONTARIO, L1H 7K4**

(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:

(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)