

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

Construction Act

City of Niagara Falls

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

Oakwood Long Term Care Facility

(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:

Phase 1 Abatement and Demolition

(short description of the improvement)

to the above premises was substantially performed on April 30, 2024

(date substantially performed)

Date certificate signed: 20240715


W. de Boer; Schouten Exc.
Contractor

Neil Simon

Digitally signed by Neil Simon
Date: 2024.07.16 11:14:48 -04'00'

(payment certifier where there is one - signature required)

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

Name of owner: Maryban Holding Ltd

Address for service: 3700 Billings Courtm Burlington, ON, L7N 2N6

Name of contractor: Schouten Excavating Inc.

Address for service: 7908 Jariott St. Watford, ON, N0M 2S0

Name of payment certifier (where applicable): _____

Address: _____

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

6747 Oakwood Drive, Niagara Falls, ON.

(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, the name and address of the person or body to whom the claim for lien must be given)