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

Construction Act

City of Welland	
(County/District/Regional Municipality/Town/City in which premises are situated)	······································
119 Lincoln St, Welland, 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:	
Two 3 story condominium buildings consisting of 30 units	
(short description of the improvement)	***************************************
to the above premises was substantially performed on September 4th 2024 (date substantially performed)	
Date certificate signed: September 4th 2024	6 h./.
(payment certifier where there is one) (owner and contractor, where there is no payment certifier Scott	ffer)
Name of owner: The Waterway Inc.	
Address for service: 119 Lincoln St, Welland, ON L3C 0L2	
Name of contractor: Rankin Construction Inc.	
Address for service: 20 Corporate Park Drive, St.Catharines, ON, L2S 3W2	
Name of payment certifier (where applicable):	
Address:	
Use A or B, whichever is appropriate)	
A. Identification of premises for preservation of liens: 119 Lincoln St, Welland, ON, L3C 0L2 LT 27 CON 6 CROWLAND, BEING PARTS 1, 2 & 3, 59R16965; WELLAND; SUBJECT TO AN EASEMENT OVER PART 2, PLAN 59R16965 IN FAVOUR OF PART OF LOT 27 CESSION 6 CROWLAND, BEING PART 4, PLAN 59R-16965 AS IN SN689775, TOGETHER WITH AN EASEMENT OVER PART OF LOT 27 CONCESSION 6 CROWLAND, BEING PA N 59R-16965 AS IN SN689775; CITY OF WELLAND (if a lien attaches to the premises, a legal description of the premises, including all property identifier numbers and addresses for the premises)	RT 4.
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 g	iven)