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

Construction Act

TOWN OF LAKESHORE
(County/District/Regional Municipality/Town/City in which premises are situated)
(street address and city, town, etc., or, if there is no street address, the location of the premises) Break vices DR
This is to certify that the contract for the following improvement:
PAVENENT REMARKATION OF THE ABOVE LISTED STREETS (short description of the improvement)
to the above premises was substantially performed on Scorenge 16, 2020 (date substantially performed)
Date certificate signed: October 16, 2020 BLACK DOCK P. M Mice Journal Contractor, where there is no payment certifier) (payment certifier where there is one)
Name of owner: Town OF LAKESHORE
Address for service: 419 NOTRE DAME ST, BRUE PIUNE, ONT NOR IAC
Name of contractor: Mul Am Inc
Address for service: 2155 FASAD ZIGG BLACKACE DR OLOCASTIC ONT
Name of payment certifier (where applicable): Backeok P. M. NOR 160
Address: 266 ST Louis Aug, WINDSOR, ONT, NBSZK3
(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:
Towal of Latesucks, 49 Notes Dave St. (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)
BELLE RIVER, ONT, NOR 140