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

Construction Act

The Reg	gional Municipali	ity of Waterloo	
(County/District/Regional Municipality/Town/City in which the premises are situated)			
	nridge Drive, Wa		
(street address and city, town, etc., or, if there is not street address, the location of the premises)			
This is t	o certify that the	e contract for the following	improvement:
Balcony	Window Replac	ement	
(short de	escription of the in	nprovement)	
to the premises was substantially performed on:			January 19, 2021 (date substantially performed)
Date certificate signed: February 11, 2021			
Dute ce	rimeate signea.	restuary 11, 2021	
	ME	cin	
(payment certifier where there is one)		nere is one)	(owner and contractor, where there is no payment certifier)
Name of Owner: W.N.C.C. No. 159 c/o Wilson		W.N.C.C. No. 159 c/o Wils	son Blanchard Management Inc. (Cambridge)
Address for Service:		149 Ainslie Street North,	Suite 200, Cambridge, ON, N1R 3P4
Name of Contractor:		Regal Aluminum Windows & Doors Inc.	
Address for Service:		25 Doney Crescent, Vaughan ON L4K 1P6	
Name o	of Payment Certif	fier (where applicable):F	Pretium Engineering Inc.
Address: 320 Woolwich St. S, Bresl		320 Woolwich St. S, Bresla	au, ON, N0B 1M0
(Uso A o	r P. whichovor is a	naranriata)	
A.	A or B, whichever is appropriate)  Identification of premises for preservation of liens:		
Α.	identification of	i premises for preservation	or nens.
_	(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:		
_	Wilson Blanchard Management Inc. (Cambridge), 149 Ainslie Street North, Suite 200, Cambridge, ON, N1R 3P4		
_	(if a lien does not	t attach to the premises, the n	name address of the person or body to whom the claim for

lien must be given)