

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

London, ON, Canada

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

545 Fanshawe Park Rd, London, 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:

Concrete forming package for the Alto Apartment Development

(short description of the improvement)

to the above premises was substantially performed on March 10, 2021

(date substantially performed)

Date certificate signed: March 10, 2021

(payment certifier where there is one - signature required)

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

Name of owner: 2403290 Ontario Limited

Address for service: 303 Richmond St #201, London, ON N6B 2H8

Name of contractor: 340480 Ontario Ltd. o/a Concrete Forming 1980

Address for service: 3334 Wonderland Rd S, London, ON N6L 1A6

Name of payment certifier (where applicable): _____

Address: _____

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

Lot 25, RCP 1028 Designated Part 1, Plan 33R-20130; Subject to an easement as in ER125

(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:

Ali Soufan, 201-303 Richmond St, London, ON

(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)

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This is to certify that the contract for the following improvement:

(short description of the improvement)

to the above premises was substantially performed on _____ .
(date substantially performed)

Date certificate signed: _____

(payment certifier where there is one - signature required)

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

Name of owner: _____

Address for service: _____

Name of contractor: _____

Address for service: _____

Name of payment certifier (where applicable): _____

Address: _____

(Use A or B, whichever is appropriate)

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