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

Construction Act

| County of Essex |
|---|
| (County/District/Regional Municipality/Town/City in which premises are situated) |
| Part of Lot 17, Concession 10, Municipality of Lakeshore (Geographic Township of Tilbury West) |
| (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: |
| Bridge Over the McKeown Drain |
| (short description of the improvement) |
| to the above premises was substantially performed on March 14th, 2021 . |
| (date substantially performed) |
| Date certificate signed: March 16th, 2021 |
| ASB/~ |
| (payment certifier where there is one) (owner and contractor, where there is no payment certifier) |
| Corporation of the Municipality |
| Name of owner: of Lakeshore |
| Address for service: 419 Notre Dame St., Belle River, ON NOR 1A0 |
| Name of contractor: Ron's Custom Dozing |
| Address for service: 4105 Knapp Road, Comber ON N0P 1J0 |
| Name of payment certifier (where applicable): N.J. Peralta Engineering Ltd. |
| Address: 45 Division Street North, Kingsville ON N9Y 1E1 |
| (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: |
| Corporation of the Municipality of Lakeshore |
| (if the lien does not attach to the premises, a concise description of the premises, including addresses, and the name and address of the person or body to whom the claim for lien must be given) |