

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

*Construction Act*

**Town of Collingwood**

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

**459 Hume Street, Collingwood, Ontario, L9Y 1W9**

(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:

**RFP Document: 201105 Supply, Delivery, and Installation of an Emergency Generator**

(short description of the improvement)

to the above premises was substantially performed on **April 30, 2021**

(date substantially performed)

Date certificate signed: **April 30, 2021**



(payment certifier where there is one)

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

Name of owner: **Collingwood General and Marine Hospital**

Address for service: **459 Hume Street, Collingwood, Ontario, L9Y 1W9**

Name of contractor: **O'Connor Electric**

Address for service: **9 Centennial Road, Unit #2, Kitchener, Ontario N2B 3E9**

Name of payment certifier (where applicable): **Runge Engineering**

Address: **864 Hurontario Street, PO Box 387, Collingwood, Ontario, L9Y 3Z7**

(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:

**Owner**

(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)