

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

.....  
*(County/District or Regional Municipality in which premises are situate)*

.....  
*(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:

.....  
*(short description of the improvement)*

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

Date certificate signed: .....

.....  
*Name of Payment Certifier*

  
.....  
*Signature of Payment Certifier*

Name of owner .....

Address for service .....

Name of contractor .....

Address for service .....

Name of payment certifier .....

*(where applicable)*

Address .....

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:

.....  
*(If a lien does not attach to a premises, the name and address of the person or body to whom the claim for lien must be given)*

