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

Construction Act

Town of Whitchurch Stouffville
(County/District/Regional Municipality/Town/City in which premises are situated)
19 Civic Avenue, Stouffville, Ontario, L4A 1G5
(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:
Exterior Wood Facia and Soffit Rehabilitation
(short description of the improvement)
to the above premises was substantially performed on August 26 th , 2020 .
(date substantially performed)
Date certificate signed. September 5 th , 2020
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: Town of Whitchurch Stouffville
Address for service: 111 Sandiford Drive, Stouffville, Ontario, L4A 0Z8
Name of contractor: Bowie Contracting Ltd
Address for service: 11 Cardico Drive, Units 9 and 10, Stouffville, Ontario, L4A 2G5
Name of payment certifier (where applicable): Accent Building Sciences Inc.
Address: 2800 14th Ave., Unit 13, Toronto, Ontario, L3R 0E4
(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:
111 Sandiford Drive, Stouffville, Ontario, L4A 0Z8

(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)