

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

*Construction Act*

**THE CORPORATION OF THE CITY OF NIAGARA FALLS**

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

**4310 QUEEN STREET, P. O. BOX 1023, NIAGARA FALLS, ONTARIO, L2E 6X5**

(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:

**BROWN ROAD WATERMAIN REPLACEMENT - CONTRACT # 2023-557-21**

(short description of the improvement)

to the above premises was substantially performed on **OCTOBER 7, 2024**

(date substantially performed)

Date certificate signed: **DECEMBER 12, 2024**



(payment certifier where there is one)

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

Name of owner: **THE CORPORATION OF THE  
CITY OF NIAGARA FALLS**

Address for service: **4310 QUEEN STREET, P. O. BOX 1023, NIAGARA FALLS, ONTARIO, L2E 6X5**

**O'HARA TRUCKING AND**

Name of contractor: **EXCAVATING**

Address for service: **71 BERRYMAN AVENUE, ST CATHARINES, ON, L2R 0A2**

Name of payment certifier (where applicable): **CITY OF NIAGARA FALLS**

Address: **4310 QUEEN STREET, P. O. BOX 1023, NIAGARA FALLS, ONTARIO, L2E 6X5**

(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:

**CITY CLERK'S OFFICE, CORPORATION OF THE CITY OF NIAGARA FALLS**

(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)