

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

*Construction Act*

**Regional Municipality of Halton**

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

**Paramedic Station 00., 1179 Bronte Rd, Oakville ON L6M 4G3**

(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:

**T-658-23 Generator Replacement at Paramedic Station 00**

(short description of the improvement)

to the above premises was substantially performed on **July 31<sup>st</sup>, 2024**

(date substantially performed)

Date certificate signed: **August 2, 2024**



(payment certifier where there is one)

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

Name of owner: **Regional Municipality of Halton**

Address for service: **1151 Bronte Road, Oakville, ON L6M 3L1**

**Active Mechanical Services o/b**

Name of contractor: **1246175 Ontario Limited**

Address for service: **3153 Wharton Way, Mississauga, O L4X 2B6**

Name of payment certifier (where applicable): **Moon-Matz Ltd.**

Address: **2902 South Sheridan Way, Suite 300, Oakville, ON L6J 7L6**

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

**PIN # 25069-0170 ( 1151 Bronte Road, Oakville, ON L6M 3L1)**

(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 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)