

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

Construction Act

OXFORD COUNTY / SOUTH WEST-OXFORD TOWNSHIP

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

OXFORD ROAD 10 (CULLODEN LINE) BETWEEN MUNICIPAL No. 292291 & 292305, BROWNSVILLE, SOUTH WEST-OXFORD TOWNSHIP

(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:

TENDER-RDS-2025-632 - 2025 OXFORD ROAD 10 (BROWNSVILLE) STORM REPAIRS - CONTRACT RFQ 930199 - C - 2025

(short description of the improvement)

to the above premises was substantially performed on **NOVEMBER 12, 2025**

(date substantially performed)

Date certificate signed: **NOVEMBER 12, 2025**

Reuben Davis

(payment certifier where there is one)

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

Name of owner: **OXFORD COUNTY**

Address for service: **21 REEVE STREET, P.O. BOX 1614, WOODSTOCK, ON, N4S 7Y3**

MALCOLM HOLDINGS INC.

Name of contractor: **(MALCOLM EXCAVATING)**

Address for service: **PO BOX 179, 385432 HWY. 59 BURGESSVILLE, ONTARIO N0J 1C0**

Name of payment certifier (where applicable): **REUBEN DAVIS, P.ENG.**

Address: **21 REEVE STREET, P.O. BOX 1614, WOODSTOCK, ON, N4S 7Y3**

(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:

AS ABOVE

(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)

Form 9

Final Audit Report

2025-11-12

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