

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

City of Mississauga

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

4005 Hickory Dr

(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:

FLat Roofs, Balconies, Siding

(short description of the improvement)

to the above premises was substantially performed on 2023-2024 NOVEMBER 15, 2024
(date substantially performed)

Date certificate signed: DECEMBER 2, 2024

(payment certifier where there is one - signature required)

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

Name of owner: HICKORY LIMITED PARTNERSHIP

Address for service: 300 - 1090 DON MILLS ROAD, TORONTO, ON, M3C 5K6

Name of contractor: MARK BUDIC (JLK CONTRACTING.)

Address for service: 4614 KEYSTONE CRES. BURLINGTON, ONT. L7M 6L9

Name of payment certifier (where applicable): _____

Address: _____

(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:

300 - 1090 DON MILLS ROAD, TORONTO, ON, M3C 5K6

(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)