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

Construction Act

City of Toronto ,
(County/District/Regional Municipality/Town/City in which premises are situated)
1st Floor, A Wing, K Wing and D Wing, 3276 St Clair Ave E, Scarborough, ON M1L 1W1
(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:
Assembly Kitchen and Gym Relocation - Providence Healthcare
(short description of the improvement)
to the above premises was substantially performed on 2024-12-05
(date substantially performed)
Date certificate signed: 2024-12-09
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(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: Providence Healthcare
Address for service: 3276 St Clair Ave E, Scarborough, ON M1L 1W1
Name of contractor: Compass Constr. Resources LTD
Address for service: 77 - 2700 Dufferin St, Toronto, ON, M6B 4J3
Name of payment certifier (where applicable): Hanson + Jung Architects Inc.
Name of payment certifier (where applicable). Introduction of the certifier (where applicable).
Address: Suite 301, 477 Richmond Street West, Toronto, ON M5V 3E7
(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens: CITY OF TORONTO BEING PART OF LOT 33, CONCESSION C (SCARBOROUGH) DES. AS PARTS 1, 2. 3, 4, 6, 11, 12. 14, 1 5, 16, 1 8, 25 & 29, PLAN 66R17778
(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, 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)