Etobicoke, ON		
(County/District/Regional Municipality/Town/City in which premises are situated)		
10 Carlson Court		
(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:		
This is to certary that the contract of the following improvement.		
Parapet Wall Repairs		
(Short Description of the Improvement)		
To the above premises was substantially performed on:		January 8, 2025
		(Date Substantially Performed)
Date Certificate Signed: January 10, 2025		
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343		
(Payment Certifier Where There is One)		(Owner and Contractor, Where There is No Payment Certifier)
(Tayment Certiller Where There is One) (Owner and Contractor, Where There is No Fayment Certiller)		
Name of Owner:	Crown Pron	erty Management Inc.
Name of Owner.	Crown Frop	erty Management inc.
Address for Service:	90 Sheppard Avenue East, Suite 305, Toronto, ON M2N 3A1	
Name of Contractor:	Maxim Group General Contracting Limited	
Name of Contractor.	Maxim Group General Contracting Limited	
Address for Service:	PO Box 249, 56 Gordon Collin Drive, Gomley, ON LOH 1G0	
Name of Daymont Cortifier (where applicable)	Engineering Link Incorporated	
Name of Payment Certifier (where applicable):	Engineering Link Incorporated	
Address:	375 Univers	ity Ave., Suite 901, Toronto, ON, M5G 2J5
(Use A or B, whichever is appropriate)		
A. Identification of premises for preservation of liens:		
A. Identification of premises for preservation of fields.		
(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:		
NA 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		