

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

Construction Act

City of Hamilton

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

711 Concession Street, Hamilton ON L8V 1C3

(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:

JHCC BAC Ultrasound

(short description of the improvement)

to the above premises was substantially performed on January 14,2025

(date substantially performed)

Date certificate signed: January 14,2025



(payment certifier where there is one)

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

Name of owner: Hamilton Health Sciences

Address for service: 711 Concession St., Hamilton ON, L8V 1C3

Name of contractor: MERIT CONTRACTORS NIAGARA Ltd.

Address for service: 140 Niagara Street, Suite 101 St. Catharines, ON L2R 4L4

Name of payment certifier (where applicable): WalterFedy

Address: 675 Queen Street South, Suite 111, Kitchener, ON N2M 1A1

(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:

711 Concession Street, Hamilton ON L8V 1C3

(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)