

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

*Construction Act*

**TORONTO**

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

**91 RYLANDER BLVD UNIT #207-209, SCARBOROUGH, ON, M1B 5M5**

(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:

**OFFICE INTERIOR RENOVATION**

(short description of the improvement)

to the above premises was substantially performed on **02-04-2025**

(date substantially performed)

Date certificate signed: **02-09-2025**

(payment certifier where there is one)

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

Name of owner: **THE CO-OPERATORS**

Address for service: **130 MACDONELL STREET, GUELPH, ON, N1H 6P8**

Name of contractor: **DMS CONSTRUCTION**

Address for service: **4267 ALTA PLACE, MISSISSAUGA, ON, L4Z 1P7**

Name of payment certifier (where applicable): **N/A**

Address:

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

**91 RYLANDER BLVD UNIT #207-209, SCARBOROUGH, ON, M1B 5M5**

(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, the name and address of the person or body to whom the claim for lien must be given)