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

Construction Act

CITY OF OAKVILLE
(County/District/Regional Municipality/Town/City in which premises are situated)
279 LAKESHORE RD E
(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:
BANK; INTERIOR ALTERATIONS
(short description of the improvement)
to the above premises was substantially performed on
Date certificate signed: FEBRUARY 13, 2025
FRED CHONG
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: JONES LANG LASALLE
Address for service: 181 BAY STREET, SUITE 1100, TORONTO, ONTARIO
Name of contractor: YORK FACILITY SERVICES
Address for service: 200 TROWERS RD. UNIT #6, VAUGHAN, ONTARIO
Name of payment certifier (where applicable): WZMH ARCHITECTS
Address: 95 ST. CLAIR AVE WEST, UNIT 1500, TORONTO, ONTARIO
(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:
JONES LANG LASALLE, 200 WELLINGTON ST WEST, SUITE 605, TORONTO, ONTARIO

(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)