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

Construction Act

Toronto			
	(County/District/Regional Municipality/	Fown/City in which premises are situated)	
30 The Queensy	vay, Toronto, Ontario, M6R 1B5		
	(street address and city, town, etc., or, if there i	is no street address, the location of the premises)	
This is to certify tha	at the contract for the following improvem	nent:	
East Wing Stack	Replacement E-37		
	` '	n of the improvement)	
to the above premises was substantially performed on January 30, 2025			
	((date substantially performed)	
Date certificate sign	ned: March 3, 2025		
	V	Lett	
(payment certifier w	here there is one - signature required)	(owner and contractor, where there is no payment certifier - signatures required)	
Name of owner:	nity Health		
Address for service: 30 Bond Street, Toronto, Ontario, M5B 1W8			
Name of contractor	lame of contractor: English and Mould Mechanical Contractors Inc.		
Address for service: 521 Piercey Road Unit 1, Bolton, Ontario, L7E 5B5			
Name of payment of	certifier (where applicable):		
Address:			
(Use A or B, whichever	· is appropriate)		
✓ A. Identific	ation of premises for preservation of lien	s:	
30 The	Queensway, Toronto, Ontario, M	6R 1B5	
	•	remises, a legal description of the premises, Fier numbers and addresses for the premises)	
B. Office to	o which claim for lien must be given to pr	reserve lien:	
(if the li	en does not attach to the premises, the name an	d address of the person or body to whom the claim for lien must be given)	