

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

TORONTO, ONTARIO

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

UNIVERSAL CITY PHASE 2-1474 BAYLE ST, PICKERING

(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:

ARCHITECTURAL PRECAST PANELS

(short description of the improvement)

to the above premises was substantially performed on NOVEMBER 20, 2023

(date substantially performed)

Date certificate signed: March 4, 2025

(payment certifier where there is one)


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

Name of owner: UNIVERSAL CITY TWO
DEVELOPMENT INC

Address for service: 150 FERRAND DRIVE, SUITE 801, TORONTO, ON M3C 3E5

Name of contractor: GLOBAL PRECAST INC

Address for service: 2101 TESTON ROAD, MAPLE ONTARIO

Name of payment certifier (where applicable): _____

Address: _____

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

1474 BAYLY ST, PICKERING, ON, L4W-1L8

(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, a concise description of the premises, including addresses,
and the name and address of the person or body to whom the claim for lien must be given)

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TORONTO, ONTARIO

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

UC TOWER PHASE 3

(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:

ARCHITECTURAL PRECAST PANELS

(short description of the improvement)

to the above premises was substantially performed on OCTOBER 24, 2024

(date substantially performed)

Date certificate signed: March 4, 2025

(payment certifier where there is one)

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

Name of owner: UNIVERSAL CITY THREE
DEVELOPMENT INC

Address for service: 150 FERRAND DRIVE, SUITE 801, TORONTO, ON M3C 3E5

Name of contractor: GLOBAL PRECAST INC

Address for service: 2101 TESTON ROAD, MAPLE ONTARIO

Name of payment certifier (where applicable): _____

Address: _____

(Use A or B, whichever is appropriate)

☐ A. Identification of premises for preservation of liens:

1435 CELEBRATION DRIVE, PICKERING ON, L1W-OC4

(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, a concise description of the premises, including addresses, and the name and address of the person or body to whom the claim for lien must be given)