

12 March 2025 (*sent via e-mail*)

To: **Hamilton Health Sciences**
Hamilton General Hospital
237 Barton Street East
Hamilton, ON L8L 2X2

Attention: **Mr. Marlon Martinez**
Project Manager

Project: **Hamilton Health Sciences – HGH Ears, Nose, and Throat Clinic Renovation**
237 Barton Street East, Hamilton, ON L8L 2X2
CAI Project no. 24101
Building Permit # 24T 3490 G3

RE: **Substantial Performance**

Dear **Mr. Marlon Martinez**,

We enclose here with, one copy of our Certificate of Substantial Performance, dated 12 March 2025.

This certificate establishes the date of Substantial Performance of the Contract as 4 March 2025. This date is the commencement of all guaranteed periods as outlined in the contract documents. The date this Certificate is published in a construction trade newspaper, by the Contractor, or the date the contract is completed, will commence the 60-day lien period.

Upon completion of the lien period, and no liens have been registered, the holdback monies will be due and payable. We will issue a Certificate for Holdback Release at that time.

Regards,

Chu Architects Inc.



Horhon Chu, *Principal*

CC:

T. Rittenhouse – Merit Contractors Niagara Ltd.

Z. Schipper – Merit Contractors Niagara Ltd.

P. Gabany – ARC Engineering Inc.

M. Botezan – ARC Engineering Inc.

J. DiBartolo – Seguin Engineering Inc.

K. Seguin – Seguin Engineering Inc.

S. Yousuf – Chu Architects Inc.

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)

237 Barton Street East, Hamilton, ON L8L 2X2

(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:

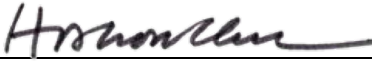
HGH Ears, Nose, and Throat Clinic

(short description of the improvement)

to the above premises was substantially performed on **March 4, 2025**

(date substantially performed)

Date certificate signed: **March 12, 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: **237 Barton Street East, Hamilton, ON L8L 2X2**

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): **Chu Architects Inc.**

Address: **484 Markham Street, Toronto, ON M6G 2L3**

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

HHS HGH Ears, Nose, and Throat Clinic

(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)