

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

Construction Act

City of Toronto

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

Princess Margaret Hospital, 610 University Avenue, Toronto, ON, M5G 2M9

(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:

Linac Unit 17 Decant Space Brachytherapy Suite SAP# 110024074

(short description of the improvement)

to the above premises was substantially performed on January 17, 2025

(date substantially performed)

Date certificate signed: January 25, 2025

Tomer Zarhi, P.Eng 
(payment certifier where there is one)

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

Name of owner: University Health Network

Address for service: 67 College Street, 2nd Floor, Toronto, ON, M5G 2M1

Name of contractor: Sure General Contractors Inc.

Address for service: 215 Midwest Road, Toronto, Ontario, M1P 3A6

Name of payment certifier (where applicable): Quasar Consulting Group

Address: 250 Rowntree Dairy Road, Woodbridge, Ontario, L4L 9J7

(Use A or B, whichever is appropriate)

- ☒ A. Identification of premises for preservation of liens:
21208-0284 (LT) being: LT E E/S MURRAY ST PL 1-49-55 TORONTO; PT LT D E/S MURRAY ST PL 1-49-55 TORONTO PT 1, 63R4125; CITY OF TORONTO; TOGETHER WITH AN EASEMENT OVER PART 2 PLAN 66R24255 AS IN AT2127132

(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)