

**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)

**2867 Ellesmere Rd, Scarborough, ON M1E 4B9**

(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:

**Scarborough Health Network Centenary X-Ray Replacement Project**

(short description of the improvement)

to the above premises was substantially performed on **February 28<sup>th</sup>, 2025**

(date substantially performed)

Date certificate signed: **April 4<sup>th</sup>, 2025**



(payment certifier where there is one)

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

Name of owner: **Scarborough Health Network**

Address for service: **2867 Ellesmere Rd, Scarborough, ON M1E 4B9**

Name of contractor: **Chart Construction Management**

Address for service: **7681 Hwy 27, Unit 11, Woodbridge, ON. L4L 4M5**

**Kasian Architecture Ontario**

Name of payment certifier (where applicable): **Incorporated**

Address: **85 Hanna Avenue, Suite 300, Toronto, ON, Canada M6K 3S3**

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

**2867 Ellesmere Rd, Scarborough, ON M1E 4B**

(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, the name and address of the person or body to whom the claim for lien must be given)