

CERTIFICATE OF SUBSTANTIAL PERFORMANCE

OF THE CONTRACT UNDER SECTION 32 OF THE ACT *Construction Act*

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

City of Hamilton

(Street Address and City, Town, etc., or, if there is no street address, the location of the premises)

1200 Main Street West, Hamilton, ON L8N 3Z5

This is to certify that the Contract for the following improvement:

Hamilton Health Sciences – MUMC – Multi-Purpose Fluoroscopy (MES) & Pediatric Procedural Sedation Rooms

(short description of the improvement)

to the above premises was substantially performed on

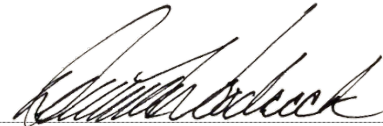
May 2, 2025

(date substantially performed)

WALTERFEDY

Date Certificate Signed

May 2, 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

100 King Street West, Hamilton, ON, L8P 1A2

Name of Contractor

Chart Construction Management Inc.

Address for Service

7681 York Regional Rd 27, 11, Vaughan, ON, L4L 4M5

Name of Payment Certifier

WalterFedy

(where applicable)

Address

20 Hughson Street South, Hamilton, ON, L8N 2A1

(Use A or B whichever is appropriate)

A. Identification of premises for preservation of liens:

(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 and affidavit must be given to preserve lien:

100 King Street West, Hamilton, ON, L8P 1A2

(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)

