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

Construction Act

Midla	and, Ontario
(County/District/Regional Municipality	y/Town/City in which premises are situated)
1112 St. Andrews D	rive, Midland, ON. L4R 4P4
	re is no street address, the location of the premises)
This is to certify that the contract for the following improve	ement:
GBGH N	MRI ADDITION
(short descripti	ion of the improvement)
to the above premises was substantially performed on	May 01, 2025
	(date substantially performed)
Date certificate signed: May 09, 2025	
	-
(payment <b>çértifief)wl∜ene</b> there is one) TIINA S.PARTERI CHANDUR ADMATERI NO	(owner and contractor, where there is no payment certifier)
2025-05-09 IN Pay Conoral Hospital	
Name of owner: Georgian Bay General Hospital	
Address for service: 1112 St. Andrews Drive, Midla	and, ON. L4R 4P4
Name of contractor: REA Investments Limited o/a	REA Construction
Address for service: 70 Deerhide Crescent North	··· York. ON M9M 2Y6
Name of payment certifier (where applicable):Cumu	ulus Architects Inc.
Address: 160 Pears Ave. #300, Toronto, ON M5	5R 3P8
(Use A or B, whichever is appropriate)	
	ens:
<u> </u>	ON: CON 1 OS N PT LOT 107 E PT;LOT 108 RP 51R1282 PART 1;PART
	premises, a legal description of the premises, ntifier 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)