

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)

600 University Avenue, Toronto ON, M5G 1X5

(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:


Medical Room Renovation

(short description of the improvement)

to the above premises was substantially performed on April 30, 2025

(date substantially performed)

Date certificate signed: May 09, 2025

 DSA Arch
(payment certifier where there is one)

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

Name of owner: Sinai Health System

Address for service: 600 University Avenue, Toronto, ON, M5G 1X5

Name of contractor: Chart Construction Management

Address for service: 7681 Hwy 27, Woodbridge ON L4L 4M5t

Name of payment certifier (where applicable): Diamond Schmitt Architects

Address: 384 Adelaide Street West, Suit 100, Toronto Ont, M8V 1R7

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

PIN: 21208-0007 (LT), PIN: 21208-0008 (LT), PIN: 21208-0009 (LT), PIN: 21208-0010 (LT), PIN: 21208-0285 (LT), PIN: 21208-0286 (LT)

(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)