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

Construction Act

Toronto
(County/District/Regional Municipality/Town/City in which premises are situated)
80 College Street, Toronto, M5G 2E2
(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:
Ground Floor Gymnasium
(short description of the improvement)
to the above premises was substantially performed on April 25 2025.
(date substantially performed)
Date certificate signed: 05/20/2025
Paul Clardson
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
(build and contractor, where there is the payment continer)
Name of owner: The College of Physicians and Surgeons of Ontario
Address for service: 80 College Street, Toronto, Ontario, M5G 2E2
Name of contractor: Arguson Projects Inc.
Address for service: 2655 North Sheridan Way #400, Mississauga, ON, L5K 2P8
Name of payment certifier (where applicable):
Address:
(Use A or B, whichever is appropriate)
<ul><li>A. Identification of premises for preservation of liens:</li><li>80 College Street, Toronto, Ontario, M5G 2E2</li></ul>
(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)