

FORM 9

CERTIFICATE OF SUBSTANTIAL PERFORMANCE OF THE CONTRACT UNDER SECTION 32 OF THE ACT

Construction Act

City of Timmins, District of Cochrane

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

700 Ross Avenue East, Timmins, Ontario, P4N 8P2

(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:

Timmins and District Hospital Pharmacy Upgrade

(short description of the improvement)

to the above premises was substantially performed on May 23, 2025

(date substantially performed)

Date certificate signed: May 23, 2025



(payment certifier where there is one)

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

Name of owner: Timmins and District Hospital

Address for service: 700 Ross Avenue East, Timmins Ontario P4N 8P2

Name of contractor: MSN Consulting/Contracting

Address for service: 200 Feldman Rd, Unit B, Timmins Ontario P4N 7C5

Name of payment certifier (where applicable): Architecture49. Inc

Address: 1427 Riverside Drive, Suite 2, Timmins, Ontario P4R 1M8

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

TISDALE CON 3 PT LOTS 10 11; M51C PT BLK C 6R2515 PART 2; AND PT PARTS 1 3 AND 4; 6R1944

(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)