

FORM 9

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

Construction Act

Toronto, ON M5V 1R2
(County/District/Regional Municipality/Town/City in which premises are situated)

121 King Street West, Suite 1910, Toronto, ON M5V 1R2
(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:

Suite 1910 Renovation
(short description of the improvement)

to the above premises was substantially performed on April 25, 2025
(date substantially performed)

Date certificate signed: _____

DocuSigned by:

 Rod Campbell 4/27/2025
CAE450A867CA1477

DocuSigned by:

 Nina Russell 4/28/2025
4196231948CC3417

(payment certifier where there is one - signature required)

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

Name of owner: Cavell Risk Inc.

Address for service: 121 King Street West, Suite 1910, Toronto, ON M5V 1R2

Name of contractor: Harrington and Associates Ltd.

Address for service: 105-9821 Leslie Street, Richmond Hill, ON L4B 3Y4

Name of payment certifier (where applicable): N/A

Address: _____

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:
 121 King Street West, Suite 1910, Toronto, ON M5V 1R2
(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)