

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

Construction Act

Toronto, Ontario

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

200 Elizabeth Street, Toronto, Ontario M5G 2C4

(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:

Chief Radiology Office (0613-08)

(short description of the improvement)

to the above premises was substantially performed on **May 27th, 2021**

(date substantially performed)

Date certificate signed: **May 27th, 2021**



(payment certifier where there is one)

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

Name of owner: **Toronto General Hospital**

Address for service: **200 Elizabeth Street, Toronto, Ontario M5G 2C4**

Name of contractor: **Rea Construction**

Address for service: **70 Deerhide Crescent, North York, Ontario M9M 2Y6**

Name of payment certifier (where applicable): **Parkin Architects Limited**

Address: **1 Valleybrook Drive Toronto, Ontario M3B 2S7**

(Use A or B, whichever is appropriate)

☐ A. Identification of premises for preservation of liens:

200 Elizabeth Street, Toronto, Ontario M5G 2C4

(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)