## FORM 6

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

Construction Lien Act

| City of Vaughan  |  |
|--|--|
| (County/District or Regional Municipality/City or Borough of   |  |
| Municipality of Metropolitan Toronto in which premises are situate)  |  |
| 02021  | A STATE OF THE STA |
| 9383 Islington Avenue, Vaughan, Ontario (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 impro-  | vement:  |
| Palliative Care New 10 Bed Residential Hospice   |  |
| (short descrip   | tion of the improvement)   |
| to the above premise was substantially performed on:   | 30 April 2021  |
|  | (date substantially performed)   |
| '  | (dute substantially performed)   |
| Date certificate signed: 30 April 2021   | Im Ah  |
|  | (Signature of payment certifier where there is one)  |
|  | Contract Administrator, MMMC Architects  |
|  |  |
|  |  |
|  | (Signature of owner and contractor, where there is no  |
|  | payment certifier)   |
| Name of owner: Hospice Vaughan   |  |
| - Annual  |  |
| Address for service: 9383 Islington Avenue, Vaughan, Ontario   |  |
| Name of contractor: Nexrock Design Build Inc.  |  |
| Address for service: 1 - 40 Snidercroft Road, Concord, ON, L4K 0B5   |  |
| Name of payment certifier: MMMC ARCHITECTS   |  |
| (where applicable)   |  |
| Address: 127 Brant Ave., Brantford, ON N3T 3H5   |  |
| The second of th |  |
| (Use A or B whichever is appropriate)  |  |
| A. Identification of premises for preservation of liens:   |  |
| 9383 Islington Avenue, Vaughan, Ontario  |  |
| (where liens attach to premises, reference to lot and plan or instrument registration number)  |  |
| B. Office to which claim for lien must be given to preserve lien:  |  |
|  |  |
| (where liens do  | not attach to premises)  |