

Main Rehabilitation (2011) Inc.

46 Guided Crt. Toronto, Ontario M9V 4K6

Office: (416) 798-1011 Fax: (416) 798-1018

FACSIMILE COVER LETTER

DATE:	June 10,2021	TIME:
TO:	Whom It May Concern	
COMPANY:	Whom It May Concern Daily Commercial News	
ADD/CITY:		
FAX No:	1-800-947-7966	
FROM:	MAIN REHABILITATION (2011) INC.	
TEL NO:	(416) 798-1011	
FAX NO:	(416) 798-1018	
RE:	ertificate of Publication	
WE ARE TRANS	MITTING $\underline{\mathcal{A}}$ PAGES (Including this cover page)	
IF YOU	DO NOT RECEIVE ALL OF THE PAGES, PLEASE CALL OUR OFFICE	AT (416) 798-1011
COMMENTS:		
Reques	t for Substantial Performance	
Publica	tion for City of Thunder Bay	
Contrac	c+#8,2021 - Cleaning and Cen	nent
	Lining of Cast Iron Waterman	

From:

To:18009477966

06/10/2021 10:53

#063 P.002

JUN/09/2021/WED 03:11 PM Engineering

FAX No. 807-625-3588

P. 001/001

Form 6

Construction Lien Act, 1983

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

City of Thunder Bay	
(County/District or k Municipality of Metropo	Regional Municipality/City or Borough of litan Toronto in which premises are situate)
500 Donald Street East, Thunder Bay, Ontario P7E 5	•
	if there is not street address, the location of the premises)
This is to certify that the contract for the following in	aprovement:
Contract 8, 2021 - Cleaning and Cement Morter Lini	ing of Cast Iron Watermains
	scription of the improvement)
To the above premises was substantially performed of	n: June 9 th , 2021
	(date substantially performed)
Date certificate signed: June 9th, 2021	
	(Signature of payment certifier where there is one)
	•
	C:
	(Signatures of owner and contractor, where there is no payment certifier)
Name of owner: City of Thunder Bay	
Address for service: 500 Donald Street East, Thunder	Bay, Ontario P7E 5V3
Name of contractor: Main Rehabilitation (2011) Incorp	porated
Address for service: 46 Guided Court, Toronto, ON M	9V 4K6
Name of payment certifier: Brian Newman, P.Eng., Pro	
	(where applicable)
Address: 500 Donald Street East, Thunder Bay, Ontario	o P7E 5V3
(Use A or B whichever is appropriate)	
A. Identification of premises for preservation of liens	:
N/A	
(where liens attach to premises, refere	nce to lot and plan or instrument registration number)

B. Office to which claim for lien and affidavit must be given to preserve lien:

500 Donald Street East, Thunder Bay, Ontario P7E 5V3, Aπention: Ms. Krista Power, City Clerk

(where liens do not attach to premises)