

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

Construction Act

Municipality of Kincardine

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

1199 Queen St. Kincardine, ON N2Z 1G6

(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:

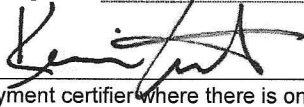
CT Scanner Addition - Enabling Works (HDR Proj #10093167)

(short description of the improvement)

to the above premises was substantially performed on August 9, 2021

(date substantially performed)

Date certificate signed: August 12, 2021


(payment certifier where there is one)

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

Name of owner: South Bruce-Grey Health Centre

Address for service: 1199 Queen St. Kincardine, ON N2Z 1G6

Name of contractor: Allen-Hastings Limited

Address for service: 28 Birch Road, RR1 Miller Lake, ON N0H 1Z0

Name of payment certifier (where applicable): HDR Architecture Associates Inc.

Address: 252 Pall Mall St., Suite 300, London, Ontario N6A 5P6

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

1199 Queen St. Kincardine CON A PT LOT 18

(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)