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

Construction Act

| City of Toronto   |
|---|
| (County/District/Regional Municipality/Town/City in which premises are situated)  |
| 610 University Avenue, Toronto ON M5G 2M9   |
| (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:   |
| PMH Staff Lounges Renovations   |
| (short description of the improvement)  |
| to the above premises was substantially performed on 8 October 2021 .   |
| (date substantially performed)  |
| Date certificate signed: 8 October 2021   |
| V. A. A.  |
| (payment certifier where there is one) (owner and contractor, where there is no payment certifier)  |
|   |
| Name of owner: University Health Network  |
| Address for service: 610 University Avenue, Toronto ON M5G 2M9  |
| Name of contractor: Rea Construction  |
| Address for service: 70 Deerhide Crescent, North York ON M9M 2Y6  |
| Name of payment certifier (where applicable): Thomas Brown Architects Inc.  |
| Address: 500-197 Spadina Avenue, Toronto M5T 2C8  |
| (Use A or B, whichever is appropriate)  |
| A. Identification of premises for preservation of liens:  |
| PMH Staff Lounge Renovations 610 University Avenue Toronto ON M5G 2M9   |
| (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)                  |