

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

Construction Act

Toronto, On.

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

200 Elizabeth St, Toronto, ON 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:

MDRD Endoscope Installation

(short description of the improvement)

to the above premises was substantially performed on November 23, 2021

(date substantially performed)

Date certificate signed: November 23, 2021


Michael Povlo

(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 St, Toronto, ON M5G 2C4

English and Mould Mechanical

Name of contractor: Contractors Inc.

Address for service: 521 Piercey RD unit 1, Bolton, On., L7B 5B5

Name of payment certifier (where applicable): Quasar Consulting Group

Address: 250 Rowntree Dairy Road, Woodbridge, ON L4L 9J7

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

200 Elizabeth St, Toronto, ON 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, a concise description of the premises, including addresses,
and the name and address of the person or body to whom the claim for lien must be given)