

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)

190 Elizabeth Street, Toronto, ON

(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:

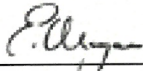
Toronto General Hospital Organ Regeneration Lab (ORL) Renovation

(short description of the improvement)

to the above premises was substantially performed on October 29, 2021

(date substantially performed)

Date certificate signed: November 19, 2021



(payment certifier where there is one)

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

Name of owner: University Health Network

Address for service: 700 Bay St. 7th Floor, Toronto, ON, M5G 1Z6

Dineen Construction

Name of contractor: Management Corporation

Address for service: 70 Disco Road Suite 300 Toronto, ON, M9W 1L9

Name of payment certifier (where applicable): Turner & Townsend

Address: 2 St. Clair Avenue West, Floor 12, Toronto, ON, M4V 1L5

(Use A or B, whichever is appropriate)

- ☒ A. Identification of premises for preservation of liens:
21341-0158 (LT)

LT 7 PL 1147 CITY WEST; TORONTO, CITY OF TORONTO

(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)