FORM 10 CERTIFICATE OF COMPLETION OF SUBCONTRACT UNDER SUBSECTION 33(1) OF THE ACT

Construction Act

This is to certify the completion of a subcontract for the	supply of services or materials between
Rafat General Contractor Inc.	and Fram Construction Management Inc.
(name of subcontractor)	
dated the May day of 16 , 20	0
The subcontract provided for the supply of the following	services or materials:
Excavation	
to the following improvement:	
McMaster Graduate Student Residence	
	ption of the improvement)
of premises at 191 King Street West, Hamilton, ON	
	or if there is none, the location of the premises)
Date of certification May 16, 2022	
A	
\longrightarrow	
(payment certifier where there is one)	(owner and contractor)
Name of owner: KCAP McMaster Grad GP Inc.	
Address for service: 45 St. Clair Avenue West, Suite	1001. Toronto. ON M4V-1K9
FRAM Construction Managemen	
Name of contractor: Inc.	
Address for service: 141 Lakeshore Rd, West, Mississauga, ON L5G-1E3	
Name of payment certifier (where applicable): SRM Ar	chitects Inc.
Address: 279 King Street West, Suite 200 Kitchener	Optario N2G 1B1
(Use A or B, whichever is appropriate)	
\boxtimes A. Identification of premises for preservation of	
	rge St, & Caroline St, G.S. Tiffany Survey - Unregistered and
Registered Plan N 114 in the City of Hami	losed by order registered as INST N HA 136733) and ilton
(if a lien attaches to the state of the stat	he premises, a legal description of the premises, lentifier numbers and addresses for the premises)
B. Office to which claim for lien must be given t	o 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)