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

This is to certify the completion of a subcontr	ract for the supply of services or materials between
Myer Salit Limited	and Martinway Developments Limited
(name of subcontractor)	
dated the 26th day of January	, 20
The subcontract provided for the supply of the Rebar Supply	e following services or materials:
to the following improvement:	
Unionville Seniors Housing Project	
	(short description of the improvement)
of premises at 4310 Highway #7, Markh	nam, ON
	eet address, or if there is none, the location of the premises)
Date of certification May 19, 2022	BLOW
(baymen) certifier where there is one - signature r	required) (owner and contractor - signatures required)
Name of owner: Martinway Developmen	nts Limited
Address for service: 20 Claireport Cresce	ent #10, Etobicoke, ON M9W 6P6
Name of contractor: Myer Salit Limited	
Address for service: PO Box 837, STN M	lain, Niagara Falls, ON L2E 6V6
Name of payment certifier (where applicable)	HCA Architecture Incorporated Architects
Address: 100 Sheppard Avenue West,	Suite 100, Toronto, ON M2N 1M6
(Use A or B, whichever is appropriate)	
☐ A. Identification of premises for pres	ervation of liens:
K40 00	ered Plan 2886, City of Markham
(if a lien a	attaches to the premises, a legal description of the premises, 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 premi-	ses, the name and address of the person or body to whom the claim for lien must be given)