

Complete Energy Solutions Ltd.

June 1, 2022

Mr. Rafael Abo

Unit #8 - 4444 Eastgate Parkway,
Mississauga, Ontario, CA

Sent Via email: rafael.abo@completees.ca

RE: 10 Navy Wharf Ct., Toronto, ON
Cooling Plant Retrofit at TSCC#1694
Substantial Performance
Our Project No.: M20-0206

Enclosed please find the Certificate of Substantial Performance for the above noted project. Please provide the following information with the Submission of the Release of Holdback Invoice:

- Proof of Publication
- Current WSIB Clearance Certificate

A Close Out meeting with Management, *CES* and *Trinity* will be conducted on June 2nd, 2022. Training on the new equipment to be provided to the site by *CES*. One hard copy and one electronic copy of the Close-out Documents to be provided to the site by *CES*. Close-out Documents to include:

- Installation and Operation Manuals
- Shop drawings
- Start-up Reports and sign off direct from Manufacturer
- ESA certificate
- Marked up as Built Drawings
- Warranty Letter(s)
- Change Orders
- Water Balancing Report
- Disposal Letter & ODP Tags
- Notice of Project

We trust this is the information you require at this time. Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

Trinity Engineering & Consulting Inc.



Matej Nikolic, Senior Associate.

matej@trinityeng.ca 647-290-9647

Enclosed:

- Certificate of Substantial Performance (Form 6)

FORM 6

**CERTIFICATE OF SUBSTANTIAL PERFORMANCE OF THE CONTRACT
UNDER SECTION 32 OF THE ACT**

Construction Lien Act

*(County/District or Regional Municipality/City or Borough of
Municipality of Metropolitan Toronto in which premises are situate)*

(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:

(short description of the improvement)

to the above premise was substantially performed on:

(date substantially performed)

Date certificate signed: _____

Matej Nikolic

(Signature of payment certifier where there is one)

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

Name of owner: _____

Address for service: _____

Name of contractor: _____

Address for service: _____

Name of payment certifier: _____

(where applicable)

Address: _____

(Use A or B whichever is appropriate)

A. Identification of premises for preservation of liens:

(where liens attach to premises, reference to lot and plan or instrument registration number)

B. Office to which claim for lien must be given to preserve lien:

(where liens do not attach to premises)