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

Construction Act

City of Osha	awa and The Regional Municipality of Durham, Ontario.
	(County/District/Regional Municipality/Town/City in which premises are situated)
1 Hospital C	ct, Oshawa, ON L1G 2B9
	(street address and city, town, etc., or, if there is no street address, the location of the premises)
This is to cer	rtify that the contract for the following improvement:
OR 5 & 6 Re	enovations, Level 2
	(short description of the improvement)
to the above	premises was substantially performed on July 18, 2022 .
	(date substantially performed)
Date certifica	ate signed: July 18, 2022
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(¢	payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of own	ner: Lakeridge Health - Oshawa Hospital
Address for s	service: 1 Hospital Ct, Oshawa, ON L1G 2B9  Dineen Construction (2017)
Name of conf	tractor: Corporation
Address for s	service: 70 Disco Rd., Suite #300, Toronto ON M9W 1L9
Name of nav	ment certifier (where applicable): Parkin Architects Limited
Address: 11	Hospital Ct, Oshawa, ON L1G 2B9
(Use A or B, wh	hichever is appropriate)
🛭 A. Ic	dentification of premises for preservation of liens:
	80 Harwood Ave S, Ajax, ON L1S 2J4
	(if a lien attaches to the premises, a legal description of the premises,
_	including all property identifier numbers and addresses for the premises)
☐ B. O	Office to which claim for lien must be given to 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)
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