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

Construction Act

Toronto ,
(County/District/Regional Municipality/Town/City in which premises are situated)
30 Bond Street, Toronto, Ontario M5B 1W8 ,
(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:
SMH 5CC Cysto Equipment Replacement
(short description of the improvement)
to the above premises was substantially performed on July 14, 2022 . (date substantially performed)
Date certificate signed: August 10 ,2022
H.H.Angus and Associates Ltd. Brian Gabelmann B. Gabelo
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: St. Michael's Hospital
Address for service: 30 Bond Street, Toronto, ON, M5B 1W8
Name of contractor: AC Mechanical Contractors Ltd.
Address for service: 17-2857 Sherwood Heights Drive Oakville, ON L6J 7J9
Name of payment certifier (where applicable): H.H.Angus and Associates Ltd.
Address: 1127 Leslie Street, Toronto, ON, M3C 2J6 Canada
(Use A or B, whichever is appropriate)
 A. Identification of premises for preservation of liens: LOTS 48, 49, 50, 51, 52, 53, 54, 55, 56, AND 56 ON THE EAST SIDE OF VICTORIA STREET. LOTS 2, 3, 4, 5, 6, 7, 8, 9 AND 10 ON THE WEST SIDE OF BOND STREET. LOTS 2, 3, 4, 5, 6, 7, AND 8 ON THE NORTH SIDE OF QUEEN STREET AND VICTORIA LANE. REGISTERED PLAN 22A (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)