

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

Construction Act

CITY OF TORONTO

(County/District/Regional Municipality/Town/City in which premises are situated)

610 UNIVERSITY AVENUE, TORONTO, ONTARIO, M5G 2C1

(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:

PM PUBLIC FACING SCREENS REPLACEMENT

(short description of the improvement)

to the above premises was substantially performed on **July. 27th, 2022**

(date substantially performed)

Date certificate signed: **September. 2nd, 2022**

(payment certifier where there is one)

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

UNIVERSITY HEALTH NETWORK
Name of owner: **(UHN)**

Address for service: **190 ELIZABETH STREET, TORONTO, ONTARIO, M5G 2C4**

SURE GENERAL CONTRACTORS
Name of contractor: **INC.**

Address for service: **215 MIDWEST ROAD, TORONTO, ONTARIO, M1P 3A6**

Name of payment certifier (where applicable): **UNIVERSITY HEALTH NETWORK**

Address: **700 BAY STREET, SUITE 602, TORONTO, ONTARIO, M5G 1Z6**

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

PRINCESS MARGARET HOSPITAL, 610 UNIVERSITY AVENUE, TORONTO, ONTARIO, M5G 2C1

(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, the name and address of the person or body to whom the claim for lien must be given)

Princess Margaret Hospital

Address	PIN Number	Legal Description
610 University Avenue	21208-0284(LT)	LT E E/S MURRAY ST PL 1-49-55 TORONTO; PT LT D E/S MURRAY ST PL 1-49-55 TORONTO PT 1, 63R4125; CITY OF TORONTO; TOGETHER WITH AN EASEMENT OVER PART 2 PLAN 66R24255 AS IN AT2127132