FORM 6 NOTICE OF NON-PAYMENT OF HOLDBACK UNDER SECTION 27.1 OF THE ACT

Construction Act

Name: University Health Network		
(Name of owner, contractor or subcontractor)		
Address: 190 Elizabeth Street, 1S-414, Toronto ON, M5G 2C4		
Description of the premises:		
University Health Network, Toronto General Hospital Central Pharmacy, 585 University Ave., Toronto, Ontario		
Name	ne of [contractor]:	Investments Limited o/a REA Construction
Address: 70 Deerhide Crescent North York, Ontario M9M 2Y6, vito@reaconstruction.org		
Address for service, if known: vito@reaconstruction.org		
The [e [owner] will not pay the following amount required t	to be paid under sections 26 and 27 of the Construction Act.
(Use	e A or B, whichever is applicable)	
A.	The full amount of the holdback, being \$	1073188.08
В.	A portion of the amount of the holdback, being \$	· · · · · ·
	[If applicable] A copy of any notice of non-payment of holdback from the [contractor/subcontractor (choose one)] is enclosed.	

Date: 19-Oct-2022

Plani

(Owner)