

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

*Construction Act*

**City of Markham**

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

**101 Town Centre Blvd**

(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:

**Armada Community Centre Washroom and Changeroom Refurbishment**

(short description of the improvement)

to the above premises was substantially performed on **10/26/2022**

(date substantially performed)

Date certificate signed: **10/26/2022**

(payment certifier where there is one)

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

Name of owner: **City of Markham**

Address for service: **2401 Denison st**

Name of contractor: **Icon Restoration**

Address for service: **245 Marlee Ave, North York, ON M6B 4B8**

Name of payment certifier (where applicable): **City of Markham**

Address: **101 Town Centre Boulevard Markham, Ontario, L3R 9W3**

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

**2401 Denison St. Markham ON**

(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)