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

Construction Act

| TORATTO, OUTARIO  |
|---|
| (County/District/Regional Municipality/Town/City in which premises are situated)  |
| ZOO COMBELLAND STREET TOLATTO, OJ MOR OB 7  |
| (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:   |
| STOPIN & METRIE DE LANGE TRANSCE & ACOUSTICS  |
| SOPPLY \$ 145TALL METAL FRAMING DRYWALL \$ ALCOUSTICS (short description of the improvement)  |
| to the above premises was substantially performed on 27/10/22 .×  |
| (date substantially performed)  |
| Date certificate signed × 27/10/28  |
| Klich / AAA   |
| (payment certifier where there is one - signature required)  (owner and contractor, where there is no payment certifier - signatures required)  |
| Name of owner: ZOO COMBERLAND BUILDING GROUP INC.   |
| Address for service: 95 ST. CLAIR AUE 41EST #1600 TOR, OIL MAY ING  |
| Name of contractor: CAMCORP (ZOO)IHC.   |
| Address for service: 95 ST. CLAIR AUE MEST, TOL, ON MAYING  |
| Name of payment certifier (where applicable): Name of payment certifier (where applicable):   |
| Address:  |
| (Use A or B, whichever is appropriate)  |
| A. Identification of premises for preservation of liens:  CUMBERLAND STREET, TORONTO, BEING PART OF LOT 1, EAST SIDE OF AVENUE RDAISTERED PLAN 29P-Y.  STERED PLAN 29P-Y AND PART OF LOT IF ON LEGISTERED PLAN 29P-Y. |
| (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)  |