FORM 6

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

Construction Lien Act

City of Sarnia

(County/District or Regional Municipality/City or Borough of Municipality of Metropolitan Toronto in which premises are situate)

89 Norman Street, N7T 6S3

(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:

New Bluewater Health Hospital Heliport

(short description of the improvement)

to the above premise was substa		November 30, 2022 (date substantially performed)
Date certificate signed: Jan	uary 4, 2023	(Signature of phyment certifier where there is one)
		<i>(Signature of owner and contractor, where there is no payment certifier)</i>
Name of owner: Bluewater Health		
Address for service: 89 N	89 Norman Street, Sarnia, ON N7T 6S3	
Name of contractor: 1751	1751578 Ontario Ltd.	
Address for service: 200	200 Junction Ave, Chatham, ON N7M 0T5	

Name of payment certifier: Aviotec International Inc.

(where applicable)

Address: 2425 Matheson Blvd, E., 8th Floor, Mississauga, ON L4W 5K4

(Use A or B whichever is appropriate)

A. Identification of premises for preservation of liens:

Bluewater Health, 89 Norman Street, Sarnia, ON N7T 6S3

(where liens attach to premises, reference to lot and plan or instrument registration number)

B. Office to which claim for lien must be given to preserve lien:

(where liens do not attach to premises)