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

CONSTRUCTION ACC
Tocarto, Catano
(County/District/Regional Municipality/Town/City in which premises are situated)
(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:
Supply trostall laminate, luxury ving tenginared hardward from (short description of the improvement)
to the above premises was substantially performed on (date substantially performed)
Date certificate signed: \sqrt{AO} , \sqrt{AS} , \sqrt{AOS}
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: MCD (Roehaupton) Limited Partnership
Address for service: 51 Constellation Caut Suite 200 Toxento, AN MAN 1KY
Name of contractor: The Rise Wood Home IMC
Address for service: 49 Bakersfield Street Fronto ON Most 124
Name of payment certifier (where applicable): MCD (Rachaupton) Whated Partnerd
Address:(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens:
(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)

FORM 9 CERTIFICATE OF SUBSTANTIAL PERFORMANCE OF THE

CONTRACT UNDER SECTION 32 OF THE ACT Construction Act

Locanto, CAtano
(County/District/Regional Municipality/Town/City in which premises are situated)
(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:
Supply + install laminate, luxury Uny + engineered hardwood floor (short description of the improvement)
to the above premises was substantially performed on (date substantially performed)
Date certificate signed: Jan. 25,2023
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: MCD (Roehaupton) Limited Partnership
Address for service: 51 Constellation Caut Suite 200 Toronto, AN MEN 1KG
Name of contractor: The Rise Wood Homing Tive.
Address for service: 49 Bakersfield Street, Toronto, ON MOJ 124
Name of payment certifier (where applicable):
Address:(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens:
E2 Condos-39+41 Roehampton Ave. Toronto (IN)
(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)