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

Construction Act

City of Hamilton , Ontario ,
(County/District/Regional Municipality/Town/City in which premises are situated)
Level 0, 50 Charlton Avenue East, Toronto, ON
(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:
Pharmacy Boxpicker Installation
(short description of the improvement)
to the above premises was substantially performed on January 31, 2023 .
(date substantially performed)
Date certificate signed: January 31, 2023
Mr. adh
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: St. Josephs Healthcare Hamilton
Name of owner. Ot. observe freatment trainment
Address for service: 50 Charlton Avenue East, Hamilton, ON L8N 4A6
Name of contractor: Merit Contractors Niagara Ltd.
Address for service: 235 Martindale Road, Suite 3, St. Catherines, ON L2W 235
Address for service. 200 martinadic Road, out 6 9, 6t. outrierings, 614 2247 200
Name of payment certifier (where applicable): Hanson + Jung Architects Inc.
Address: Suite 301, 477 Richmond Street West, Toronto, ON M5V 3E7
(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens:
St. Josephs Healthcare Hamilton, 50 Charlton Street East, Toronto L8N 4A6
(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)