

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

*Construction Act*

Hamilton

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

2757 King Street East, Hamilton, ON L8G 5E4

(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:

MDR Sterilizer - King Campus

(short description of the improvement)

to the above premises was substantially performed on February 2, 2023

(date substantially performed)

Date certificate signed: February 2, 2023



(payment certifier where there is one)

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

Name of owner: St. Joseph's Healthcare Hamilton

Address for service: 2757 King Street East, Hamilton, ON L8G 5E4

Integricon Prop Restoration

Name of contractor: Const Group

Address for service: 219 Westcreek Drive, Vaughan, ON L4L 9T7

Name of payment certifier (where applicable): Mantecon Partners Inc.

Address: 15 Foundry Street, Dundas, ON L9H 2V6

(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:

St. Joseph's Healthcare Hamilton - 2757 King Street East, Hamilton, ON L8G 5E4

(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)