## FORM 10 CERTIFICATE OF COMPLETION OF SUBCONTRACT UNDER SUBSECTION 33(1) OF THE ACT

Construction Act

This is to certify the completion of a subcontract for the supply of services or materials between

Panelized Building Solutions Inc.				a	and Trillium Housing Oak Non-Profit Corporation ,	
		(name of s	ubcontractor)			
dated	the	20th day of	May	, 20 2	<u>1</u>	
The s	ubcc	ontract provided fo	or the supply of the	ne following ser	vices or materials:	
Panel	ized	l Framing				
to the	follo	wing improvemer	nt:			
Maxx	Urb	an Towns				
				(short description	n of the improvement)	
of pre	mise	es at <b>2635 Willia</b>	m Jackson Driv	e. Pickerina O	N L1V 2P8	
					there is none, the location of the premises)	
Date (	of ce	rtification Februa	arv 14 <sup>th</sup> 2023			
Date	51 00	Tunodion			3 Johnson	
					Z-~	
		(payment certifier v		n Drofit	Trillium Housing Oak Non-Profit Corporation VanMar Constructors ON 1017 Inc.	
Name	of c	wner: <b>Corporati</b>	lousing Oak No on	n-Profit	Non-Profit Corporation Vanimar Constructors ON 1017 Inc.	
Addre	ss fo	or service: 2635 \	William Jacksor ar Constructors	······	ing ON, L1V 2P8	
Name	of c	contractor: Inc	ai Constituctors	ON 1017		
		. 445.0	- 111 0 0		NOE 0D4	
Addre	ess to	or service: 145 G	oddard Cres. C	ambridge ON i	N3E UB1	
Name	of p	ayment certifier (v	where applicable	e): <b>N/A</b>		
۸اا		NI/A				
Addre	SS.	N/A				
(Use A	or B	, whichever is approp	oriate)			
$\boxtimes$	A.	Identification of	premises for pre	servation of lien	s:	
		2635 William Jackson Drive, Pickering ON			IV 2P8	
		(if a lien attaches to the premises, a legal description of the premises,				
			including	all property identif	ier numbers and addresses for the premises)	
	В.	Office to which of	laim for lien mus	st be given to pr	reserve lien:	
		(if the lien does not attach to the premises, the nar			d address of the person or body to whom the claim for lien must be given)	