

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

City of Toronto

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

181 Bay Street, Suite 3000, Toronto

(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:

Interior alterations of partial 30<sup>th</sup> floor

(short description of the improvement)

to the above premises was substantially performed on March 6th, 2023

(date substantially performed)

Date certificate signed: March 15, 2023

  
(payment certifier where there is one)

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

Name of owner: Cleveland Clinic

Address for service: 181 Bay Street, Suite 3000, Toronto, ON, M5J 2T3

Name of contractor: Pentacon Group

Address for service: 1 Whitmore Road, Unit 18, Woodbridge, Ontario L4L 8G4

Gensler Architecture and Design

Name of payment certifier (where applicable): Canada Inc

Address: 150 King Street West, Suite 1400, Toronto ON, M5H 1J9

(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:

181 Bay Street, Suite 3000, Toronto, ON, M5J 2T3

(if the lien does not attach to the premises, a concise description of the premises, including addresses,  
and the name and address of the person or body to whom the claim for lien must be given)