

February 27, 2023

BRC Restoration Inc.  
11 Main Street North, Suite 2  
Uxbridge, ON L9P 1J7

Attention: O'Niel Satchwell

**Re: Fallingbrook PS, 155 Fallingbrook Street, Whitby, ON**  
**Exterior Wall Repairs**  
**Substantial Performance**

Dear O'Niel:

Please find enclosed the Certificate of Substantial Performance for the above noted project. Please provide the following information prior to submitting the release of holdback:

1. Proof of publication in the Daily Commercial News;
2. All warranty papers for the work;
3. WSIB Clearance Certificate; and,
4. Statutory Declaration for the release of holdback.

Should you have any questions or concerns please do not hesitate to contact me.

Regards.

**Floros Concept Incorporated**



Per: Anne Floros, B.A.Sc., M. Eng, P. Eng.  
Principal  
c: 647-822-9167  
e: anne@florosconcept.com

**Distribution**

Name	Email
X O'Niel Satchwell	<oniel.satchwell@brc-group.ca>
X Stewart Osinga	<stewart.osinga@ddsb.ca>

Encl. Certificate of Substantial Performance



**Certificate Of Substantial Performance  
Of The Contract Under Section 32 Of The Act**

Construction Lien Act

Whitby, Ontario

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

\_\_\_\_\_  
Fallingbrook PS, 155 Fallingbrook Street  
*(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:

\_\_\_\_\_  
Exterior Wall Repairs  
*(Short Description of the Improvement)*

To the above premises was substantially performed on: \_\_\_\_\_ February 3, 2023  
*(Date Substantially Performed)*

Date Certificate Signed: \_\_\_\_\_ February 27, 2023



\_\_\_\_\_  
*(Payment Certifier Where There is One)*

\_\_\_\_\_  
*(Owner and Contractor, Where There is No Payment Certifier)*

Name of Owner: \_\_\_\_\_ Durham District School Board

Address for Service: \_\_\_\_\_ 400 Taunton Road East, Whitby, ON, L1R 2K6

Name of Contractor: \_\_\_\_\_ BRC Restoration Inc.

Address for Service: \_\_\_\_\_ 11 Main Street North, Suite 2 Uxbridge, ON L9P 1J7

Name of Payment Certifier *(where applicable)*: \_\_\_\_\_ Floros Concept Incorporated

Address: \_\_\_\_\_ 151 Yonge Street, Toronto, ON M5C 2W7

*(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:

\_\_\_\_\_  
Durham District School Board, 400 Taunton Road East, Whitby, ON L1R 2K6  
*(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)*