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

Construction Act

CITY OF HAMILTON

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

S MEDICORUM PLACE, MANILLON, ON (street address and city, town, etc., or, if there is no street address, the location of the premises)

The set of defining that the contract for the following improvement.
- SITE PLAN CIVIL CONSIEUCIDON WOLKS
(short description of the improvement)
to the above premises was substantially performed on
Date certificate signed: APRIL 21, 2023 (6wMf2)
4
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: FLAMBSLOUGH POWER CLUTTE
Address for service: 5 MEOSCOLUM PLACE, HANSLION, ON
Name of contractor: BEECK SHIRA STANCTURE WARD P
Address for service: 5 MEDICORUM PLACE, HAMFLION, ON
Name of payment certifier (where applicable): _Krpan Group_
Address: 2500 APPLEBY LANT, SUFTE 200, BULLSWATON, ON, L7LOAZ
(II. A P ublahavar 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:

8 (ECH LINFLASTA-VCTOLF 4 ASVP) 158 PALS P.D. SUSTE 214

(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)

8 (ANN 15-N 0 0P) N3 V 0 A4