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

Construction Act

This is to certify t	he completion of a subcont	ract for the supply of ser	vices or materials between
Schuit Plasterii	ng and Stucco Inc	CENT and CAPA	RE ICE DEVELOPMENTS GP CORP. IN ITS CITY AS GENERAL PARTNER OF CENTRE ICE LP
***************************************	(name of subcontractor)	***************************************	
dated the 4th	day of May	, 20 23	
	provided for the supply of the son ceilings/baclony g		naterials:
to the following in Station Park	nprovement:		
Station Fark	ETCHXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(short description of the imp	provement)
of promises at 6	19 King St. Kitchener,	ON N2G1C7	
or premises at		***************************************	ne, the location of the premises)
Date of certificati	on 05/10/2023		
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27.5	CENTRE ICE DEVELOPMENTS CAPACITY AS GENERAL PARTI	GP CORP. IN ITS	(owner and contractor - signatures required)
Address for servi	ce: 145 Goddard Cresc	ent, Cambridge, ON	. N3E 0B1
Name of contract	or: Schuit Plastering an	d Stucco Inc.	
Address for servi	ce: 738 Shaver Rd. And	caster, ON. Unit A	
Name of paymen	t certifier (where applicable	): Vanmar Construct	ors ON 1028 INC
Address: 145 G	oddard Crescent, Cam	bridge, ON	
(Use A or B, whicher	ver is appropriate)		
☑ A. Identification of premises for preservation of liens:			
617-	621 and 634-641 k (if a lien including a	(ing St W Kitche attaches to the premises, a label all property identifier number	ener, ON, N2G 1E9 egal description of the premises, s and addresses for the premises)
B. Office	to which claim for lien mus	t be given to preserve lie	en:
(if the	e lien does not attach to the prem	ises, the name and address o	of the person or body to whom the claim for lien must be given)