

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

Construction Act

Municipality of Grey Highlands, Markdale ON

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

220 Toronto Street, Markdale ON

(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:

New 1 storey care and treatment (hospital) facility

(short description of the improvement)

to the above premises was substantially performed on **May 31, 2023**

(date substantially performed)

Date certificate signed: **June 1, 2023**

(payment certifier where there is one)

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

Name of owner: **Grey Bruce Health Services**

Address for service: **55 Isla Street, Markdale ON**

Name of contractor: **Bird Construction**

Address for service: **5700 Explorer Drive, Suite 400, Mississauga, ON**

Name of payment certifier (where applicable): **DIALOG Ontario Inc.**

Address: **35 John Street, Suite 500, Toronto ON**

(Use A or B, whichever is appropriate)

- ☒ A. Identification of premises for preservation of liens:
Pt Lt 103-104 Con 1 SWTSR Glenelg as in MD625 Except Pt 1 16R8337; s/t R485533; s/t GS58308 Partially Released by GS130631; s/t GS114235; GS130771; Grey Highlands; MUNICIPALITY OF GREY HIGHLANDS Being PIN 37235-0469 (LT)

(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:

(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)