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

Construction Act

This is to certify the completion of a subcontract for the supply of services or materials between **Rafat General Contractor Inc.** and Fram Construction Management Inc. (name of subcontractor) , 20 **22** dated the 13th day of **January** The subcontract provided for the supply of the following services or materials: Site Servicing to the following improvement: **McMaster Graduate Student Residence** (short description of the improvement) of premises at 191 King Street West, Hamilton, ON (street address, or if there is none, the location of the premises) Date of certification June 9, 2023 **Edward Thomas. SRM Architects Inc.** (payment certifier where there is one) (owner and contractor) Name of owner: KCAP McMaster Grad GP Inc. Address for service: 45 St. Clair Avenue West, Suite 1001, Toronto, ON M9V 1K9 **FRAM Construction Management** Name of contractor: Inc. Address for service: 141 Lakeshore Rd West, Mississauga, ON L5G 1E3 Name of payment certifier (where applicable): SRM Architects Inc. Address: 279 King Street West, Suite 200 Kitchener, Ontario N2G 1B1 (Use A or B, whichever is appropriate) A. Identification of premises for preservation of liens: \bowtie The block bound by King St, Bay St, George St, & Caroline St, G.S. Tiffany Survey - Unregistered and Part of Lot 14 and Part of the Alleyway (closed by order registered as INST N HA 136733) and Registered Plan N 114 in the City of Hamilton (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, the name and address of the person or body to whom the claim for lien must be given)