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

Construction Act

City of To	ronto ,
(County/District/Regional Municipality/Towr	
610 University Ave, Toronto	o, ON M5G 2C4 ,
(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:	
UHN Princess Margaret I	Hospital – IT Data Centre Cooling
(short description of the	he improvement)
to the above premises was substantially performed on July (date	y 14, 2023. e substantially performed)
Date certificate signed: July 18, 2023	
Greg Brady	Jeff Control of the C
group - source	(owner and contractor, where there is no payment certifier)
Project Manager	
Jniversity Health Network	
(payment certifier where there is one)	HN Construction Limited
Name of owner: University Health Network	
Address for service: 700 Bay Street, Suite 602, Toronto, Onto	tario M5G 1Z6
Name of contractor: HN Construction Ltd.	
Name of contractor. HIN Construction Ltd.	
Address for service: 1270 Finch Avenue, West, Downsview C	Ontario M3J 3J7
Name of payment certifier (where applicable):	
Address:	
(Use A or B, whichever is appropriate)	
A. Identification of premises for preservation of liens:	
7. Identification of premises for preservation of fichis.	
	ses, a legal description of the premises, umbers and addresses for the premises)
	rve lien:
University Health Network, 700 Bay Street, Suite	

(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)