

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

Construction Act

.....
Town of Whitby

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

.....
700 Gordon St Whitby Ontario L1N 5S9

.....
(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:

OS Medical Vacuum System Replacement

.....
(short description of the improvement)

to the above premises was substantially performed on ... Aug 30, 2023.

.....
(date substantially performed)

Date certificate signed: Oct 11, 2023

H.H Angus and Associates Ltd.

.....
(payment certifier where there is one)

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

Name of owner: Ontario Shores Centre for Mental Health Sciences

Address for service: 700 Gordon St Whitby Ontario L1N 5S9

Name of contractor: Maracon Construction Ltd

Address for service: 700 Gordon St Whitby Ontario L1N 5S9

Name of payment certifier (where applicable): H.H Angus and Associates

Address: 1127 Leslie Street, Toronto, Ontario, M3C 2J6

(Use A or B, whichever is appropriate)

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A. Identification of premises for preservation of liens:

700 Gordon St Whitby Ontario L1N 5S9

.....
(if a lien attaches to the premises, a legal description of the premises,
including all property identifier numbers and addresses for the premises)

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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)