

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

*Construction Act*

**Haldimand-Norfolk/Simcoe**

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

**365 West Street Simcoe ON N3Y 1T7**

(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:

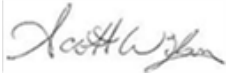
**NORFOLK GENERAL HOSPITAL CHILLER AND AIR HANDLING UNIT REPLACEMENT**

(short description of the improvement)

to the above premises was substantially performed on **24 October 2023**

(date substantially performed)

Date certificate signed: **24 October 2023**



(payment certifier where there is one)

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

Name of owner: **NORFOLK GENERAL HOSPITAL**

Address for service: **365 West St. Simcoe ON N3Y 1T7**

**Superior Boiler Works and**

Name of contractor: **Welding Limited**

Address for service: **375 McNeilly Rd. Stoney Creek ON L8E 5H4**

Name of payment certifier (where applicable): **Chorley + Bisset Ltd.**

Address: **800 - 201 Queens Ave. London ON N6A 1J1**

(Use A or B, whichever is appropriate)

☐ A. Identification of premises for preservation of liens:

(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:

**Norfolk General Hospital 365 West St. Simcoe ON N3Y 5H4**

(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)