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

Construction Act

		TORONTO, ONTARIO
	(County/District/Regional Municipality/Town/City in which premises are situated)  2306 ST CLAIR AVE WEST (street address and city, town, etc., or, if there is no street address, the location of the premises)  his is to certify that the contract for the following improvement:  DOORS, TRIM, AND FLOORING (short description of the improvement)  the above premises was substantially performed on (date substantially performed)  (payment certifier where there is one)  (payment certifier where is one)  (payment certifie	
		2306 ST CLAIR AVE WEST
		(street address and city, town, etc., or, if there is no street address, the location of the premises)
This is	s to	certify that the contract for the following improvement:
_		DOORS, TRIM, AND FLOORING (short description of the improvement)
to the	(County/District/Regional Municipality/Town/City in which premises are situated)  2306 ST CLAIR AVE WEST  (street address and city, town, etc., or, if there is no street address, the location of the premises)  inis is to certify that the contract for the following improvement:  DOORS, TRIM, AND FLOORING (ehort description of the improvement)  the above premises was substantially performed on (payment certifier where there is one)  (owner and contractor, whigh there is no payment certifier)  and of owner:  2 ST CLAIR AVENUE WEST, SUITE 1600, TORONTO, ONTARIO M4V 1L5  diverses for service:  2 ST CLAIR AVENUE WEST, SUITE 1600, TORONTO, ONTARIO M4V 1L5  diverses for service:  361 APPLEWOOD CRES, CONCORD, ONTARIO L4K 4J3  time of payment certifier (where applicable):  diverses:  236 ST CLAIR AVE WEST  (if a lien attaches to the premises, a legal description of the premises, including all property identifier numbers and addresses for 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:	
Date (	certif	ficate signed: 6431.23
		(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name	of o	owner: SYMES CLAIR DEVELOPMENT LIMITED
Addre	ss fo	or service: 2 ST CLAIR AVENUE WEST, SUITE 1600, TORONTO, ONTARIO M4V 1L5
Name	of c	contractor: GANIVA TRIM CARPENTRY LTD
Addre	ss fo	or service: 361 APPLEWOOD CRES, CONCORD, ONTARIO L4K 4J3
Name	of p	payment certifier (where applicable):
Addre	ss:	
(Use A	ог В,	whichever is appropriate)
Ä	A.	
		(if a lien attaches to the premises, a legal description of the premises, including all property identifier numbers and addresses for the premises)
	В	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 posses or hody to whom the claim for lien must be since)