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

Construction Act

CSOW RIE C1-CO1 - Fencing and Grounding

| GMC-TS-027-TWR1 GMCB_TS_Burk's Falls_Tower | | |
|---|---|--|
| (County/District/Regional Municipality/Town/City in which premises are situated) | | |
| Latitude: 45.60219989, Longtitude: -79.47639704 , | | |
| (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: | | |
| Design, construction and deployment of Products as set out in the RIE C1- CSOW effective December 18, 2020. | | |
| (short description of the | improvement) | |
| to the above premises was substantially performed on <u>Novemb</u> (date s | er 06, 2023. ubstantially performed) | |
| Date certificate signed: | Derek | Digitally signed by Derek Griffiths |
| | Griffith | Date: 2023.11.23 S 11:45:17 -05'00' |
| (payment certifier where there is one) | (owner and contractor, where there is no pa | ayment certifier) |
| Ministry of the Solicitor General Name of owner: of Ontario | | |
| Address for service: SOLGEN, GMCB 21 College Street, Suite 301 Toronto, Ontario M5G 2B3 | | |
| Name of contractor: Bell Mobility Inc. | | |
| Address for service: 5099 Creekbank Road, Mississauga, Ontario, L4W 5N2 | | |
| Name of payment certifier (where applicable): | | |
| Address: | | |
| (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) | | |
| \boxtimes B. Office to which claim for lien must be given to preserv | /e lien: | |
| Director, Legal Services Branch, SOLGEN, 655 Bay St. 5th Fl. Toronto, ON M7A 0A8 Alternatively, due to the COVID-19 emergency, claims for lien may be served at the address: cloc.reception@ontario.ca. Emails must include the sender's name, address, telephone number and email address | | |
| | cise description of the premises, including address r body to whom the claim for lien must be given) | ses, |