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

Construction Act

City of Orillia
(County/District/Regional Municipality/Town/City in which premises are situated)
170 Colborne Street West, Orillia, ON L3V 2Z3
(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:
Interior alterations to accommodate new MRi Equipment
(short description of the improvement)
to the above premises was substantially performed on <u>August 1, 2023</u> (date substantially performed)
Date certificate signed: December 12, 2023
Heidi Hanson
Hanson + Jung Architects Inc.
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: Orillia Soldiers Memorial Hospital Address for service: 170 Colborne Street W, Orillia, ON L3V 2Z3
Name of contractor: SDI Canada
Address for service: 7497 Transcanada Highway West, Montreal, PQ H4T 1T3
Name of payment certifier (where applicable): Hanson + Jung Architects Inc.
Address: Suite 301, 477 Richmond Street West, Toronto, ON M45V 3E7
(Use A or B, whichever is appropriate) A. Identification of premises for preservation of liens:
170 Colborne Street West, Orillia, ON L3V 2Z3
(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:
(if the lien does not attach to the premises, a concise description of the premises, including addresses,

and the name and address of the person or body to whom the claim for lien must be given)