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

Construction Act

Grey Bruce, Owen Sound, Ontario
(County/District/Regional Municipality/Town/City in which premises are situated)
1300 16th Ave East, Owen Sound, N4K 0J6
(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 Fitout of the new Physiotherapy tenancy
(short description of the improvement)
to the above premises was substantially performed on December 18, 2023
(date substantially performed)
Date certificate signed: December 18, 2023
19th Alles
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: CVH (NO3) LP
Address for service: 766 Hespeler Rd, Suit #301, Cambridge ON, N3H 5L8
Name of contractor: Clarence H. Graham Design & Construction Ltd.
Address for service: 1260 2nd Ave East, Owen Sound, ON, N4K 2J3
Name of payment certifier (where applicable):
Address: Southbridge Health Care LP, 766 Hespeler Rd, Suit #301, Cambridge ON, N3H 5L8
(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens:
1300 16th Ave East, Owen Sound ON, N4K 0J6
<ul><li>(if a lien attaches to the premises, a legal description of the premises, including all property identifier numbers and addresses for the premises)</li></ul>
☐ 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)