

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

Construction Act

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

215/225 Veterans Dr. Brampton
(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:

Masonry
(short description of the improvement)

to the above premises was substantially performed on

Jan 10/24
(date substantially performed)

Date certificate signed:

January 10/2024

(payment certifier where there is one)

Primont (M2 Condos) Inc.
(owner and contractor, where there is no payment certifier) x

Name of owner: Primont (M2 Condos) Inc.

Address for service: 9130 Leslie St. Suite 303 Richmond Hill, Ontario L4B-0B9

Name of contractor: Keele Finch Masonry Ltd

Address for service: 120 Carlauren Rd, Unit 9 Woodbridge, Ont. L4L-8E5

Name of payment certifier (where applicable): _____

Address: _____

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

M2-Condos 215/225 Veterans Dr. Brampton
(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, the name and address of the person or body to whom the claim for lien must be given)