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

Construction Act

CITY OF TORONIC
(County/District/Regional Municipality/Town/City in which premises are situated)
1197 THE QUEENSWAY
(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:
WINDOWS
(short description of the improvement)
to the above premises was substantially performed on3/24/23
(date substantially performed)
Date certificate signed: 11/21(23
11 8 11 7/10
(payment certifier where there is one) (owner and contractor, where there is no payment certifier) Name of owner: ZONWAY LEMZTEO PARTNERS HIP
Name of owner: ZONWAY LZMITED FARTNERS FILE
Address for service: 2 ST CLAIR AVE W SULTE 1600, TORONIO, ON MAY ILS
Name of contractor: NEWMAR WINDOW MANUFACTUR ING ZNG
Address for service: 7630 AIRPORT ROAD MIZSSISSAUGA, ON LAT 4-66
Name of payment certifier (where applicable):
Address:
(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens:
1197 THE QUEENSWAY, TORONTO
(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)