

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

Construction Act

City of Toronto, Ontario

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

700 University Ave, 4th Floor, Toronto, Ontario M5G 1X6

(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:

University Health Network Ophthalmology Renovation Phase I

(short description of the improvement)

to the above premises was substantially performed on **December 1, 2023**

(date substantially performed)

Date certificate signed: **January 16, 2024**

(paym



here is one)

(owner and contractor, where there is no payment certifier)

Name of owner: **University Health Network**

700 University Ave, 4th Floor

Address for service: **Toronto, Ontario M5G 1X6**

Name of contractor: **Furcon Environmental Inc.**

Address for service: **2495 Haines Rd, Mississauga, ON L4Y 1Y7**

Kasian Architecture Ontario

Name of payment certifier (where applicable): **Incorporated**

Address: **85 Hanna Avenue, Suite 300, Toronto, ON M6K 3S3**

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

Ophthalmology Clinical Research Unit – TWH – 6th Floor Fell Pavilion

(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)