FORM 10 CERTIFICATE OF COMPLETION OF SUBCONTRACT UNDER SUBSECTION 33(1) OF THE ACT

Construction Act

This is to certify the completion of a subcontract for the supply of services or materials between
Northern Caulking Inc. and SKYGRiD Construction Inc.
(name of subcontractor)
dated the _1 day of _November, 20 _21
The subcontract provided for the supply of the following services or materials:
Firestopping, Caulking & Smokeseal
to the following improvement:
39 Story Residential Building and 3 Retails
(short description of the improvement)
of premises at 480-494 Yonge St., Toronto
(street address, or if there is none, the location of the premises)
Date of certification 12/15/2023
Scott Yake Sandra Poss
(payment certifier where there is one) (owner and contractor)
Name of owner: 494 Yonge Street Inc.
Address for service: 100-290 North Queen Street., Toronto ON M9C5L2
Name of contractor: SKYGRiD Construction Inc.
Address for service: 5750 Explorer Drive, Suite 200, Mississauga, ON L4W 0A9
Name of payment certifier (where applicable): N/A
Name of payment certifier (where applicable).
Address: N/A
(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens:
480-494 Yonge St., 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)