

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

Construction Act

Guelph Eramosa Township

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

205 - 89 Dawson Rd, Guelph, ON, N1H 1B1

(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:

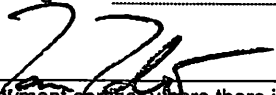
Tenant Fit Out

(short description of the improvement)

to the above premises was substantially performed on February 29, 2024

(date substantially performed)

Date certificate signed: Mar 4, 2024


(payment certifier where there is one)


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

Name of owner: Dawson Medical Clinic Inc.

Address for service: 205 - 89 Dawson Rd, Guelph, ON, N1H 1B1

Name of contractor: Woodhouse Group Inc

Address for service: 207 Madison Ave S, Kitchener, ON, N2G 3M7

Name of payment certifier (where applicable): N/A

Address: N/A

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

205 - 89 Dawson Rd, Guelph, ON, N1H 1B1

(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)