

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

City of Markham

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

381 Church Street, Markham, ON L3P 7P3

.....
(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:

Interior Renovations in Building A Level 2 for new Pharmacy

.....
(short description of the improvement)

to the above premises was substantially performed on January 30, 2024

.....
(date substantially performed)

Date certificate signed: March 21, 2024

.....
(payment certifier where there is one)

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

Name of owner: Oak Valley Health

Address for service: 381 Church Street, Markham, ON L3P 7P3

Name of contractor: NEED Design Build

Address for service: 5 Beech Ave, Bowmanville, ON L1C 3A1

Name of payment certifier (where applicable): B+H Architects

Address: 320 Bay Street, Suite 200, Toronto, ON M5H 4A6, Canada

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

381 Church Street, Markham, ON L3P 7P3

.....
(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)