

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

REGION MUNICIPALITY OF WATERLOO / CITY OF CAMBRIDGE
(County/District/Regional Municipality/Town/City in which premises are situated)


167 HESPELER RD, CAMBRIDGE, ON
(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:

MEDICAL CENTER
(short description of the improvement)

to the above premises was substantially performed on APRIL 1, 2024
(date substantially performed)

Date certificate signed: APRIL 1, 2024


(payment certifier where there is one)
P. AFONSO (PELICAN WOODCLIFF)

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

Name of owner: CROWNVIEW REAL ESTATE INC.

Address for service: 167 HESPELER RD, CAMBRIDGE, ON

Name of contractor: NEXROCK DESIGN BUILD INC.

Address for service: 40 SNIDERCROFT RD, SUITE #1, CONCORD, ON, L4R 0B5

Name of payment certifier (where applicable): PELICAN WOODCLIFF INC.

Address: 100 YORK BLVD., SUITE 608, RICHMOND HILL, ON, L4B 1J8

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

167 HESPELER ROAD, CAMBRIDGE, ON PART OF LOT 27 + LOT 28 REGISTERED PLAN No. 610
(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)