| City of Guelph | | |
|---|---|---|
| (County/District/Regional Municipality/Town/City in which premises are situated) | | |
| 83 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: | | |
| | | |
| Roof Assembly Replacement (Short Description of the Improvement) | | |
| (50.5) | | is inpresenting |
| | | |
| To the above premises was substantially performed on: | | March 29, 2024 (Date Substantially Performed) |
| | | (Date Substantially Performed) |
| | | |
| | | |
| Date Certificate Signed: April 8, 2024 | | |
| Jogofmir | | |
| | | |
| (Payment Certifier Where There is One) | | (Owner and Contractor, Where There is No Payment Certifier) |
| | | |
| | | |
| me of Owner: Northwest Healthcare Properties REIT | | Healthcare Properties REIT |
| | | |
| Address for Service: | 460 Springbank Drive, Suite 110, London, ON, N6J 0A8 | |
| Name of Contractor: | Tor Can ICI Roofing Inc. | |
| Address for Service: | 1201 Creditstone Rd, Concord, ON L4K 0C2 | |
| Name of Payment Certifier (where applicable): | Engineering Link Incorporated | |
| Address: | 375 University Avenue, Suite 901, Toronto, ON M5G 2J5 | |
| (Use A or B, whichever is appropriate) | | |
| A Identification of manifest for any | | Na |
| A. Identification of premises for pre | eservation of | liens: |
| | | |
| (If a lien attaches to the premises, a legal description of the premises, | | |
| including all property identifier numbers and addresses for the premises)) | | |
| R Office to which claim for lien must be given to present lien. | | |
| B. Office to which claim for lien must be given to preserve lien: | | |
| | | |