

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

Construction Act

SIMCOE COUNTY

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

500 CHURCH STREET, PENETANGUIHENE, ONTARIO

(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:

WAYPOINT CENTRE - NEW BOATHOUSE

(short description of the improvement)

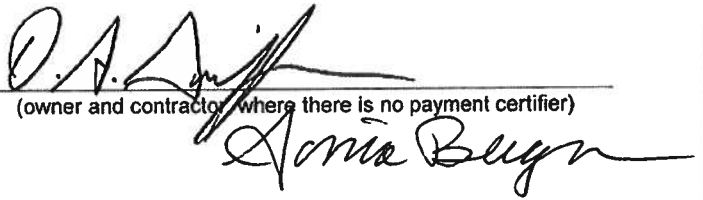
to the above premises was substantially performed on **MARCH 28, 2024**

(date substantially performed)

Date certificate signed: **APRIL 9, 2024**

(payment certifier where there is one)

(owner and contractor where there is no payment certifier)



The image shows two handwritten signatures. The top signature is in black ink and appears to be 'D.A. Quinn'. The bottom signature is in blue ink and appears to be 'Anita Blynn'.

Name of owner: **WAYPOINT CENTRE FOR MENTAL HEALTH CARE**

Address for service: **500 CHURCH STREET, PENETANGUIHENE, ONTARIO**

Name of contractor: **QUINAN CONSTRUCTION LIMITED**

Address for service: **55 PROGRESS DRIVE, ORILLIA, ONTARIO**

Name of payment certifier (where applicable): _____

Address: _____

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

500 CHURCH STREET, PENETANGUIHENE, ONTARIO

(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, a concise description of the premises, including addresses, and the name and address of the person or body to whom the claim for lien must be given)