

TRANSMITTAL

To: Morosons Construction Limited
103 Fairbank Avenue
Toronto, Ontario
M6E 3Y9
Attn: Mr. Mike Moro

Project: DV3218 OVPP Office Renovations
University of Toronto Mississauga
1867 Inner Circle Road,
Mississauga, ON L5L 1C6

Project No.: 22-158

Date: April 12, 2024

We Transmit: By Email

For Your: Use/Information

With this transmittal, please find:

1 Certificate of Substantial Performance



Barry R. Johnson, owner
BJC architects + assocs. inc.

cc: University of Toronto Mississauga
DEI Consulting Engineers

Attn: Mr. Edwin D'Cruz
Attn: Mr. Bernard Hau
Attn: Mr. Michael Pace
Attn: Mr. Jason Legacy

BARRY R. JOHNSON

*B.E.S., B.ARCH., M.R.A.I.C., LEED® AP
A.I.B.C., A.A.A., S.S.A., M.A.A., O.A.A, A.A.N.B., N.S.A.A., N.L.A.A., N.W.T.A.A.*

general.office@bjcarchitects.com

R.R.#2 8016 HIGHWAY #7, GUELPH, ONTARIO, CANADA, N1H 6H8 TEL: 519.822.7390 FAX: 519.822.5881



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

Construction Act

CITY OF MISSISSAUGA

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

WG DAVIS BUILDING, 3RD FLOOR, BLOCK J, 1867 INNER CIRCLE ROAD

(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:

UNIVERSITY OF TORONTO MISSISSAUGA
DV3218 OVPP INTERIOR OFFICE RENOVATION

(short description of the improvement)

to the above premises was substantially performed on **APRIL 12, 2024**
(date substantially performed)

Date certificate signed: **APRIL 12, 2024**



(payment certifier where there is one)

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

Name of owner: **UNIVERSITY OF TORONTO**
MISSISSAUGA

Address for service: **3359 MISSISSAUGA ROAD, MISSISSAUGA, ONTARIO L5L 1C6**

Name of contractor: **MOROSONS CONSTRUCTION**
LIMITED

Address for service: **103 FAIRBANK AVENUE, TORONTO, ONTARIO M6E 3Y9**

Name of payment certifier (where applicable): **BJC architects + assoc. inc.**

Address: **8016 HIGHWAY #7, RR2, GUELPH, ON N1H 6H8**

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

RANGE 1-3 NDS PT LTS 3-5. RP 550 PT BLK M AND RP 43R31817 PARTS 4-6

(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)