

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

Construction Act

Mississauga, Ontario

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

100 City Centre Drive, Mississauga 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:

JNH Medical Centre - 3055 Mississauga

(short description of the improvement)

to the above premises was substantially performed on April 15, 2024

(date substantially performed)

Date certificate signed: April 15th, 2024



(payment certifier where there is one)

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

Name of owner: Jack Nathan Health

Address for service: 100 City Centre Drive, Mississauga Ontario

Name of contractor: Cambria Design Build LTD.

Address for service: 1250 Journeys End Circle, Unit 1, Newmarket, Ontario L3Y 0B9

Name of payment certifier (where applicable): N/A

Address: _____

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens: 100 City Centre Dr, Mississauga ON

(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)