

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

Construction Act

City of Toronto

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

333 Sherbourne Street, Toronto, Ontario, M5A 2S5

(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:

St. Michael's Hospital Withdrawal Management Services Renovation

(short description of the improvement)

to the above premises was substantially performed on **April 23, 2024**

(date substantially performed)

Date certificate signed: **April 23, 2024**

Martin Valdmanis

(payment certifier where there is one)

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

Name of owner: **Unity Health Toronto**

Address for service: **30 Bond Street, Toronto, Ontario**

Chart Construction Management

Name of contractor: **Inc.**

Address for service: **7681 Hwy 27, Unit 11, Woodbridge, Ontario, L4L 4M5**

Name of payment certifier (where applicable): **Arcadis Architects (Canada) Inc.**

Address: **7th Floor - 55 St. Clair Avenue West, Toronto Ontario, M4V 2Y7**

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

LOT 3 AND PART OF LOTS 2 AND 4, REGISTERED PLAN D-43, CITY OF TORONTO

(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)