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

Construction Act

Toronto	
(County/District/Regional Municipality/Town/City in which premise	s are situated)
600 University Ave, 20th Floor, Toronto, Ontario	
(street address and city, town, etc., or, if there is no street address, the lo	cation of the premises)
This is to certify that the contract for the following improvement:	
Dovigi Clinic Reception Area	
(short description of the improvement)	
to the above premises was substantially performed on March 15th 2024	
(date substantially perform	ed)
Date certificate signed: April 02 th 2024	
Bluke	
(payment certifier where there is one) (owner and co	ntractor, where there is no payment certifier)
Name of owner: Mount Sinai Hospital, Dovigi Orthopedic Clinic Address for service: 600 University Ave, 20th Floor, Toronto, Ontario	
Name of contractor: Chandos Construction	
Address for service: 2680 Skymark Ave, Mississauga, Suite 600	
Name of payment certifier (where applicable): Diamond & Schmitt	
Address: 384 Adelaide St W, Suite 100	
(Use A or B, whichever is appropriate)	
A. Identification of premises for preservation of liens:	
600 University Ave, 20th Floor, Toronto, Ontario	
(if a lien attaches to the premises, a legal description including all property identifier numbers and addresse	
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)