

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

Cochrane

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

19 Hospital Drive Moose Factory, ON P0L 1W0

(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:

WAHA – Weeneebayko Hospital Lab Door Upgrades, JLR No. 32821-000

(short description of the improvement)

to the above premises was substantially performed on April 26, 2024

(date substantially performed)

Date certificate signed: April 26, 2024



(payment certifier where there is one)

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

Name of owner: Weeneebayko General Hospital

Address for service: 19 Hospital Drive Moose Factory, ON P0L 1W0

Name of contractor: P&J Gelinis Enterprises Inc.

Address for service: 320 Government Road East Kapuskasing, ON P5N 2X7

Name of payment certifier (where applicable): J.L. Richards & Associates Limited

Address: 834 Mountjoy Street South, PO Box 10, Timmins, Ontario, P4N 7C5

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

SURFACE RIGHTS ONLY ; LT 1 PL M140C ; LT 4 PL M140C EXCEPT PT 1, 6R4448 ; LT 11 PL M140C EXCEPT PT 1, CR312, PT 1, 2 & 18, 6R2794 & PT 1, 6R2980

(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)