

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

Construction Act

St. Thomas

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

189 ELM STREET ST. THOMAS ON N5R 5C4

(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:

STEGH Security Room Relocation

(short description of the improvement)

to the above premises was substantially performed on **30 April 2024**

(date substantially performed)

Date certificate signed: **30 April 2024**



(payment certifier where there is one)

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

Name of owner: **St. Thomas-Elgin General Hospital**

Address for service: **189 ELM STREET ST. THOMAS ON N5R 5C4**

Name of contractor: **Tonda Construction Ltd.**

Address for service: **1085 WILTON GROVE ROAD LONDON ON N6N 1C9**

Name of payment certifier (where applicable): **Chorley + Bisset Ltd.**

Address: **800 - 201 Queens Ave., London ON N6A 1J1**

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

(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:

St. Thomas-Elgin General Hospital 189 ELM STREET ST. THOMAS ON N5R 5C4

(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)