

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

Construction Act

Richmond Hill, ON

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

10 Trench Street, Richmond Hill, ON LC4 4Z3

(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:

MRHH C3 SOUTH MENTAL HEALTH REFRESH

(short description of the improvement)

to the above premises was substantially performed on April 29, 2024

(date substantially performed)

Date certificate signed: May 02, 2024

Tom Crossman, OAA

(payment certifier where there is one)

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

Name of owner: Mackenzie Health

Address for service: 3200 Major Mackenzie Dr. W, Vaughan, ON L6A 4Z3

Name of contractor: PCL Constructors Canada Inc.

Address for service: 2201 Bristol Circle, Oakville ON L6H 0J8

Name of payment certifier (where applicable): David Carter Architects Inc.

Address: 688 Richmond Street West, Unit 303, Toronto ON, M6J 1C5

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

PT LT 9 PL 2054 PT 1, 65R16113; PT LT 10 PL 2054 PT 1, 65R16113; PT 46 CON 1 (VGN) AS IN VA49195 EXCEPT VA63575;
S/T R736196 RICHMOND HILL

(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)