## 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)
520 Sutherland Drive, Toronto, ON M4G 3V9
(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:
Renovation of 3 existing patient lounges and 1 staff lounge
(short description of the improvement)
to the above premises was substantially performed on 2024-02-29 (date substantially performed)
Date certificate signed: 2024-02-29
Herat broom
(payment certifier where there is one) (owner and contractor, where there is no payment certifier)
Name of owner: University Health Network
Address for service: 190 Elizabeth Street, Toronto, ON M5G 2C4  Dineen Construction (2107)
Name of contractor: Corporation
Address for service: 70 Disco Road, Suite 300, Toronto, ON M9W 1L9
Name of payment certifier (where applicable): Hanson + Jung Architects Inc.
Address: Suite 301, 477 Richmond Street West, Toronto, ON
(Use A or B, whichever is appropriate)
A. Identification of premises for preservation of liens: PT LT 2 CON 2 EYS TWP OF YORK AS IN CA645124; S/T & T/W CA645124; S/T NY654860; TORONTO (N YORK/TORONTO), 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)