

**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)

2360 Yonge Street, Level 2, Toronto, ON M4P 0E2

.....  
(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:

Interior Alterations

.....  
(short description of the improvement)

to the above premises was substantially performed on May 16, 2024

.....  
(date substantially performed)

Date certificate signed: May 31, 2024

.....  
(payment certifier where there is one)

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

Name of owner: FH Health

Address for service: 2637 Yonge Street, Toronto, ON M4P 2J6

Name of contractor: Harbridge + Cross Limited

Address for service: 350 Creditstone Rd. Suite 202, Concord, ON L4K 3Z2

Name of payment certifier (where applicable): B+H Architects

Address: 320 Bay Street, Suite 200, Toronto, ON M5H 4A6, Canada

(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:

2637 Yonge Street, Toronto, ON M4P 2J6

.....  
(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)