

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

*Construction Act*

Cambridge

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

167 Hespler Road, Cambridge

(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 Renovations

(short description of the improvement)

to the above premises was substantially performed on March 30, 2024  
(date substantially performed)

Date certificate signed: April 19, 2024



(payment certifier where there is one)

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

Name of owner: Grandview Leasing Corp.

Address for service: 167 Hespler Road, Cambridge ON N1R 3H7

Name of contractor: Pharm Med Construction Ltd.

Address for service: 20 Charles St Newmarket ON L3Y 3V8

Name of payment certifier (where applicable): Pelican Woodcliff Inc.

Address: 100 York Blvd. #608, Richmond Hill, ON L4B 1J8

(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:

(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)