

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

*Construction Act*

**CITY OF MISSISSAUGA**

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

**6363 MILLCREEK DR. MISSISSAUGA, ONTARIO, L5N 1L8**

(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:


**YYZ1 HAZMAT CAGE - INTERIOR ALTERATIONS TO EXISTING BUILDING**

(short description of the improvement)

to the above premises was substantially performed on **JUNE 21, 2024**

(date substantially performed)

Date certificate signed: **7/2/2024**



(payment certifier where there is one)

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

Name of owner: **AMAZON CANADA**  
**FULFULLMENT SERVICES ULC**

Address for service: **120 BREMNER BLVD, 26<sup>TH</sup> FLOOR, TORONTO, ONTARIO M5J 0A8**

Name of contractor: **BROCCOLINI CONSTRUCTION**  
**(TORONTO) INC.**

Address for service: **2680 SKYMARK AVENUE, SUITE 800, MISSISSAUGA, ONTARIO, L4W 5L6**

Name of payment certifier (where applicable): \_\_\_\_\_

Address: \_\_\_\_\_

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

**6363 MILLCREEK DR. MISSISSAUGA, ONTARIO, L5N 1L8**

(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)