

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)

555 University Ave., Toronto, ON M5G 1X8

(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:

SickKids NICU MRI Replacement Project

(short description of the improvement)

to the above premises was substantially performed on **26-Jun-24**

(date substantially performed)

Date certificate signed: **26-Jun-24**



(payment certifier where there is one)

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

Name of owner: **The Hospital for Sick Children**

Address for service: **555 University Ave, Toronto, ON, M5G 1X8**

Name of contractor: **REA Construction**

Address for service: **70 Deerhide Crescent, North York, ON M9M 2Y6**

NORR Architects & Engineers

Name of payment certifier (where applicable): **Limited**

175 Bloor Street East, North Tower, 15th Floor, Toronto ON M4W 3R8

Address:

(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:

555 University Ave, Toronto, ON, M5G 1X8, Suite 1100

(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)