

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

Construction Act

Toronto

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

120 Bremner Blvd., Suite 1500, Toronto, ON M5J 0A8

(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 August 8, 2024
(date substantially performed)

Date certificate signed: 2024/08/13


(payment certifier where there is one)

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

Name of owner: Canadian Life & Health Insurance Association

Address for service: 79 Wellington St. W., Suite 2300, PO Box 99, TD South Tower, Toronto, ON M5K 1G8

Name of contractor: The Michael Thomas Group Inc.

Address for service: 344 Edgeley Blvd., Unit 21, Concord, ON L4K 4B7

Name of payment certifier (where applicable): Stephenson Design Associates

Address: 195 Winona Ave., Oshawa, ON L1G 3H7

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

120 Bremner Blvd., Suite 1500, Toronto, ON M5J 0A8

(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)