



CERTIFICATE OF COMPLETION

DATE: _____

NAME OF INSURED: North Peel Community Church


ADDRESS: 6060 King Street
Caledon, ON
L7C 0S1

OUR FILE: TGA-40033-PRI

Upon inspection of the work performed by **TGA GENERAL CONTRACTING & RESTORATION INC.** at the aforementioned premises, I have found the workmanship to be as per our agreement and I am pleased with the craftsmanship and acknowledge its completion.



Owner/Authorized Representative's Signature



Owner/Authorized Representative's Name
(Please Print)



Date



Michael Henton
Representative from TGA General Contracting
& Restoration Inc.

NON-TRANSFERABLE



Date: _____

CERTIFICATE OF COMPLETION

**North Peel Community Church
6060 King Street
Caledon, ON
L7C 0S1**

Dear, North Peel Community Church North Peel Community Church:

Enclosed please find our "Certificate of Completion" for the work completed by:
TGA GENERAL CONTRACTING & RESTORATION INC.

In order to validate your two-year warranty, please sign and return the "Certificate of Completion".

We value the input of our customers, therefore, we will be sending you a customer survey form to fill out. Any feedback you wish to provide would be greatly appreciated.

We thank you for the opportunity to be of service.

Yours truly,

TGA GENERAL CONTRACTING & RESTORATION INC.

John D Gagliano

John D Gagliano-Jul 10, 2020 12:11 EDT

**John Gagliano
VP of Operations**

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

Construction Act

Caledon / Ontario / L7C0S1

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

6060 King Street East

(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:

Accessibility ramp installation, automatic door installation, entry door replacement, tile repairs, trim work, masonry

(short description of the improvement)

to the above premises was substantially performed on **July 21 2020**

(date substantially performed)

Date certificate signed: **July 21 2020**

(payment certifier where there is one)

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

Name of owner: **Shiloh Apostolic Church Inc.**

Address for service: **6060 King Street East Caledon ON L4C01S**

TGA General Contracting &

Name of contractor: **Restoration Inc.**

Address for service: **6060 King Street Caledon ON L7C0S1**

Name of payment certifier (where applicable):

Address:

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

6060 King Street East Caledon Ontario L4C01S

(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)