FORM 9

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

Construction Act

The Corporation of the Town of Hamilton	
(County/District/Regional Municipality/Town/C	ity in which premises are situated)
1301 Ontario Street, Cobourg, Ontario	
(street address and city, town, etc., or, if there is no str	eet address, the location of the premises)
This is to certify that the contract for the following impr	rovement:
Community Care Northumberland Hospice	
(short description of the in	nprovement)
to the above premises was substantially performed on	August 27, 2020
	(date substantially performed)
Date certificate signed: August 27, 2020	
(payment certifier where there is one)	(owner and contractor, where there is no payment certifier)
Name of owner: Community Care Northumb	erland
Address for service: 151 Rose Glen Road, Port I	Hope, Ontario L1A 3V6
Name of contractor: Dalren Limited	
Address for service: 8781 Dale Road, R.R. #6, Cobo	ourg, ON K9A 4J9
Name of payment certifier (where applicable): Barry E	Bryan Associates
Address: 201-250 Water Street, Whitby, Ontario	
(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 premaddresses for the pre	
B. Office to which claim for lien must be given	to preserve lien:
Community Care Northumberland, 151 Rose Glen	Road, Port Hope, Ontario L1A 3V6

(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)