

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

Construction Act

North York, District of Toronto

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

3560 Bathurst St., North York ON

(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:

HIRF - Hospital Maglock Upgrade

(short description of the improvement)

to the above premises was substantially performed on **October 13, 2020**

(date substantially performed)

Date certificate signed: **October 13, 2020**



(payment certifier where there is one)

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

Baycrest Centre for Geriatric

Name of owner: **Care**

Address for service: **3560 Bathurst St., North York ON**

Name of contractor: **R.P.G. Electric Ltd.**

Address for service: **7-28 Crown Steel Dr., Markham, ON**

Baycrest Centre Of Geriatric

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

Address: **3560 Bathurst St., North York**

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:

Baycrest , 3560 Bathurst St., North York, ON M6A 2E1

(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)