

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)

30 Bond St, Toronto, ON, M5G 1W8

(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:

Replace Aluminum Panels

(short description of the improvement)

to the above premises was substantially performed on **February 24, 2021**

(date substantially performed)

Date certificate signed: _____

(payment certifier where there is one)

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

Name of owner: **Unity Health Toronto, St. Michael Site**

Address for service: **30 Bond St, Toronto, M5G 1W8**

Name of contractor: **Triumph Aluminum And Sheet Metal Inc.**

Address for service: **1 Connie St, Toronto, ON, M6L 2H8**

Name of payment certifier (where applicable): **NORR Architects**

Address: **North Tower, 175 Bloor St. E, 15 th Floor, Toronto, ON M4W 3R8**

(Use A or B, whichever is appropriate)

☒ A. Identification of premises for preservation of liens:
21098-0100 LT; LT56 E/S VICTORIA ST, 55 E/S VICTORIA ST, 54 E/S VICTORIA ST, 53 E/S VICTORIA ST, 52 E/2 VICTORIA ST, 51 E/S VICTORIA ST, 50 E/S VICTORIA ST, 49 E/S VICTORIA ST, 48 E/S VICTORIA ST, PL 22A TORONTO; UNNUMBERED LT AKA LT & N/S QUEENT ST.
(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)