

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 The Queensway Toronto, ON M6R 1B5

(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:

Gylcol Pump Replacement - The Barnicke Wing at St. Joseph's Health Centre

(short description of the improvement)

to the above premises was substantially performed on **February 1, 2021**

(date substantially performed)

Date certificate signed: **March 10, 2021**

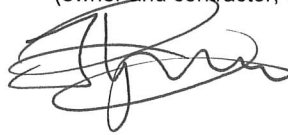
Shailesh Abhang

Digitally signed by Shailesh Abhang
DN: cn=Shailesh Abhang, o=Unity Health Toronto,
ou=201900052920, email=shailesh.abhang@unityhealth.to, c=CA
Date: 2021.03.11 09:33:42 -05'00'

(payment certifier where there is one)

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

Name of owner: **Unity Health Toronto**



**SPRINT MECHANICAL
PROJECT MANAGER**

Address for service: **30 The Queensway Toronto, ON M6R 1B5**

Name of contractor: **Sprint Mechanical Inc**

Address for service: **50 Woodbine Downs Blvd, Toronto, ON, M9W 5R2**

Name of payment certifier (where applicable):

Address:

(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 premises,
including all property identifier numbers and addresses for the premises)

☒ B. Office to which claim for lien must be given to preserve lien:

30 Bond St. Toronto, ON M5W 1W8

(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)