

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

.....
North York, Toronto

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

2111 Finch Avenue West Toronto, Ontario M3N 1N1

.....
(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:

HRH- Finch Extended Services- final completion of the contract

.....
(short description of the improvement)

March 31, 2021

to the above premises was substantially performed on

.....
(date substantially performed)

Date certificate signed: March 31, 2021

Jeff Churchill

.....
(payment certifier where there is one)

Jim Reynolds

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

Name of owner: Terry Sims rep for Humber River Hospital

Address for service: 2111 Finch Avenue West Toronto, Ontario M3N 1N1

Name of contractor: Compass Construction Resources LTD.

Address for service: 2700 Dufferin St. Unit 77, Toronto, Ontario, M6B 4J3

Name of payment certifier (where applicable): Jeff Churchill

Address: 400 University Ave, Toronto, Ontario M5G 1S5

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(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

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(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:

Attention: Terry Sim, Humber River Hospital, 200 Church St, York, ON M9N 1N8, Canada

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(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)

