

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

Construction Act

Regional Municipality of York

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

Markham Stouffville Hospital 381 Church Street, Markham, Ontario L3P 7P3

(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:

General Contractor Services - Druxy's Relocation

(short description of the improvement)

to the above premises was substantially performed on March 31, 2023

(date substantially performed)

Date certificate signed: March 31, 2023



(payment certifier where there is one)

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

Name of owner: Oak Valley Health - Markham Stouffville Hospital

Address for service: 381 Church Street, Markham, Ontario L3P 7P3

Name of contractor: Brook Restoration Ltd.

Address for service: 11 Kelfield Street, Etobicoke, Ontario M9W 5A1

Name of payment certifier (where applicable): Paquette Architects Inc

Address: 150 King S. W., Suite 200, Toronto, Ontario, M5H 1J9

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

Markham Stouffville Hospital, 381 Church Street, Markham, Ontario L3P 7P3

(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)