

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)

85 GRENVILLE STREET, 4th FL, TORONTO, ON M5S 3A2, PERMIT # 20-163612

.....
(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:

INTERIOR ALTERATIONS

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

to the above premises was substantially performed on **OCTOBER 15TH, 2020**
(date substantially performed)

Carole Austin
Date certificate signed: **OCTOBER 19TH, 2020**

BRITACAN FACILITIES MANAGEMENT GROUP

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

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

Name of owner: **ONTARIO NURSES ASSOCIATION**

Address for service: **85 GRENVILLE STREET, 4TH FL, TORONTO, ON M5S 3A2**

Name of contractor: **GREENFERD CONSTRUCTION INCORPORATED**

Address for service: **70 EAST BEAVER CREEK RD, UNIT 42, RICHMOND HILL, ON L4B 3B2**

Name of payment certifier (where applicable): **BRITACAN FACILITIES MANAGEMENT GROUP**

Address: **505 CONSUMERS ROAD SUITE 1010 TORONTO, ON M2J 4V8**
.....
(Use A or B, whichever is appropriate)



A. Identification of premises for preservation of liens:

85 GRENVILLE STREET, 4TH FL, TORONTO, ON M5S 3A2

.....
(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)