

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

*Construction Act*

Thornhill

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

51 and 65 Times Ave

\_\_\_\_\_  
(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:

2019 Garage Repair

\_\_\_\_\_  
(short description of the improvement)

to the above premises was substantially performed on November 5, 2020  
(date substantially performed)

Date certificate signed: November 5, 2020



\_\_\_\_\_  
(payment certifier where there is one - signature required)

\_\_\_\_\_  
(owner and contractor, where there is no payment certifier -  
signatures required)

Name of owner: YRCC 1001 and Equiton Residential Income Fund GP Inc.

Address for Service: 51 and 65 Times Ave, Thornhill

Name of Contractor: Heritage Restoration Inc.

Address for Service: 14 Paisley Lane, Stouffville ON, L4A 7X4

Name of payment certifier (where applicable): Sense Engineering Ltd.

Address: 10 Greensborough Village Circle, Unit 15, Markham ON L6E 1M4

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

PL 65M3226 Pt BLK 39 RP 65R26171 PTS 1 3 4 5 & 6

(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)