

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

Construction Act

Grey County

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

1800 8th Street East, Owen Sound, ON N4K 6M9

(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:

Owen Sound Hospital - Lab Flooring Replacement - Phase 1 and 2

(short description of the improvement)

to the above premises was substantially performed on August 2, 2024

(date substantially performed)

Date certificate signed: August 6, 2024

(payment certifier where there is one)

David Roberson

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

Name of owner: Brightshores Health System

Address for service: 1800 8th Street East, Owen Sound, ON N4K 6M9

Name of contractor: Anacond Contracting Inc.

Address for service: 111 Zenway Blvd, Unit 7, Vaughan, ON

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:

1800 8th Street East, Owen Sound, ON N4K 6M9

(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)