



19 December 2024

File No. 10117

CLARK MULTI-TRADE CONTRACTORS INC.  
74279 PARR LINE  
VARNA ON N0M 2R0

Attention: Ian Clark

**Re: SJHC Steel Piping Replacement – Parkwood Institute, Main Building C**

Dear Sirs:

Please find enclosed a copy of the Certificate of Substantial Performance of the Contract Under Section 32 of the Construction Act, for this project.

Be advised that you are required to advertise the contents of the Substantial Completion Certificate in a construction trade publication. On the date of publication, the 60-day lien period will start. Please submit a copy of the advertisement to our office.

Upon conclusion of the 60-day lien period, the total monies due to you will be paid by the Owner, providing all deficiencies have been corrected. If all deficiencies have not been corrected, you will be paid the holdback only.

Yours truly,

CHORLEY & BISSET LTD.  
Per:

A handwritten signature in black ink, appearing to read 'B. Rysdale', is written over a light blue horizontal line.

Brady Rysdale

Encls.

BDR:cmw

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

*Construction Act*

**London**

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

**550 Wellington Road London ON N6C 5J1**

(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:

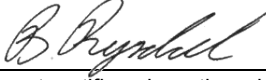
**SJHC Steel Piping Replacement – Parkwood Institute, Main Building**

(short description of the improvement)

to the above premises was substantially performed on **19 December 2024**

(date substantially performed)

Date certificate signed: **19 December 2024**



(payment certifier where there is one)

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

Name of owner: **St. Joseph's Health Care London**

Address for service: **268 Grosvenor Street, London, ON N6A 4V2**

**Clark Multi-Trade Contractors**

Name of contractor: **Inc.**

Address for service: **74279 Parr Line, Varna, ON N0M 2R0**

Name of payment certifier (where applicable): **Chorley + Bisset Ltd.**

Address: **800 - 201 Queens Ave London ON N6A 1J1**

(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:

**St. Joseph's Health Care London 268 Grosvenor Street, London, ON N6A 4V2**

(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)