

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

City of Pembroke

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

705 MacKay Street Pembroke ON K8A1G8

.....
(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:

Pembroke Regional Hospital (Tower C Main Entrance Renovations)

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

to the above premises was substantially performed on

May 12, 2026

(date substantially performed)

Date certificate signed: **July 15, 2026**

David Olivieri



DREDGE LEAHY Architects Inc.

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

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

Name of owner **Pembroke Regional Hospital**

Address for service **705 MacKay Street Pembroke ON K8A 1G8**

Name of contractor **Jumec Construction Incorporated.**

Address for service **106-6 Bexley Place, Ottawa, ON, K2H 8W2**

Name of payment certifier **DREDGE LEAHY Architects Inc.**

Address **411 – 11 Holland Ave., Ottawa, ON K1Y 4S1**

(Use A or B whichever is appropriate)

A. Identification of premises for preservation of liens:
705 MacKay Street Pembroke ON K8A1G8 City of Pembroke

.....
(where liens attach to premises, reference to lot and plan or instrument registration number)

B. Office to which claim for lien and affidavit must be given to preserve lien:

.....
(where liens do not attach to premises)