

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

Construction Act

Owen Sound, ON

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

1800 8th St E., Owen Sound, Ontario

(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:

Renovation works for the 5th floor oncology pharmacy

(short description of the improvement)

to the above premises was substantially performed on November 29, 2023

(date substantially performed)

Date certificate signed: December 20, 2023



DAVID O'CONNOR P.ENG
CBCL

(payment certifier where there is one)

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

Name of owner: Brightshores Health System

Address for service: 1800 8th St E, Owen Sound, ON N4K 6M9

Name of contractor: Sutherland-Schultz

Address for service: 150 Water St S, Unit 201, Cambridge, ON N1R 3E2

Name of payment certifier (where applicable): CBCL

Address: 112 Kent Street, Suite 400, Place De Ville Tower B, Ottawa, ON K1P 5P2

(Use A or B, whichever is appropriate)

A. Identification of premises for preservation of liens:

1800 8th St E., Owen Sound, Ontario

(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)