



**Dream Pools and Spas  
1105 Washington Blvd  
Pittsburgh, Pennsylvania 15206  
(412) 661-7665  
Laboratory Analysis Report**

Lab ID No. 02-04041

S-1

Lab# 444

**Customer**

Facility Name: *Highpoint Fitness*  
Address: *1000 Higbee Dr.  
Bethel Park, PA 15102*  
Matrix: *Recreational Water*  
Source Type: *Therapy Pool*

**Sample Collection**

Date: *2/10/26*  
Time: *12:25 PM*  
Method: *Grab*

**Sample Final Analysis**

Date: *2/13/26*  
Time: *10:30 AM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	2/11/26	10:00 AM	SL
Total coliforms:	0/100mls	2/100mls	2/11/26	10:00 AM	SL
Standard plate count:	0/ml	200/ml	2/10/26	5:30 PM	SL

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.6 SU	7.2 - 7.8 SU	2/10/26	12:25 PM	MM
Chlorine:	4.0 mg/l	1.0 - 5.0 mg/l	2/10/26	12:25 PM	MM
Turbidity:	1 NTU	1 - 2 NTU	2/10/26	12:25 PM	Visual

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor