



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

Lab ID No. 02-04041

W-13

Lab# 2557

Customer

Facility Name: *Virginia Hills West*
Address: *200 Falls Church Rd.
Imperial, PA 15126*
Matrix: *Recreational Water*
Source Type: *Pool*

Sample Collection

Date: *7/15/25*
Time: *10:00 AM*
Method: *Grab*

Sample Final Analysis

Date: *7/18/25*
Time: *9:30 AM*
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	7/16/25	10:50 AM	EB
Total coliforms:	0/100mls	2/100mls	7/16/25	10:50 AM	EB
Standard plate count:	0/ml	200/ml	7/15/25	4:20 PM	AH

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	8.0 SU	7.2 - 7.8 SU	7/15/25	10:00 AM	AH
Chlorine:	2.0 mg/l	1.0 - 5.0 mg/l	7/15/25	10:00 AM	AH
Turbidity:	1 NTU	1 - 2 NTU	7/15/25	10:00 AM	Visual

Sample comments

(When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor



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