



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

Lab ID No. 02-04041

**N-14**

**Lab# 033**

**Customer**

Facility Name: *Candlewood Suites*  
Address: *20036 Rt. 19, Oak Tree Place*  
*Cranberry Twp., PA 16066*

**Sample Collection**

Date: *7/28/25*  
Time: *10:15 AM*  
Method: *Grab*

Matrix: *Recreational Water*  
Source Type: *Pool*

**Sample Final Analysis**

Date: *7/31/25*  
Time: *9:00 AM*  
Analyst: *AS*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time |         | Analyst | Method   |
|-----------------------|----------|-----------------|----------------------|---------|---------|----------|
| Escherichia Coli:     | Absent   | Absent          | 7/29/25              | 9:10 AM | EB      | SM 9222G |
| Total coliforms:      | 0/100mls | 2/100mls        | 7/29/25              | 9:10 AM | EB      | SM 9222B |
| Standard plate count: | 0/ml     | 200/ml          | 7/28/25              | 2:46 PM | EB      | SM 9215B |

| Field Analysis | Results  | Reporting limit | Date/Time |          | Analyst | Method |
|----------------|----------|-----------------|-----------|----------|---------|--------|
| pH:            | 7.2 SU   | 7.2 - 7.8 SU    | 7/28/25   | 10:15 AM | ZR      | DPD    |
| Chlorine:      | 3.0 mg/l | 1.0 - 5.0 mg/l  | 7/28/25   | 10:15 AM | ZR      | DPD    |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 7/28/25   | 10:15 AM | ZR      | Visual |

**Sample comments**

Andre Smith, Lead Supervisor

( When exceeding reporting limit pool or spa is unfit)



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