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

Lab ID No. 02-04041

S-14

Lab# 429

Customer		*Sample Collection*	
Facility Name:	*Upper St. Clair High School*	*Date:*	*5/29/25*
		Time:	*9:55 AM*
Address:	*1825 McLaughlin Run Rd.*	*Method:*	*Grab*
	Upper St. Clair, PA 15241		
		Sample Final Analysis	
Matrix:	*Recreational Water*	*Date:*	*5/31/25*
		Time:	*3:30 PM*
Source Type:	*Lap Shallow*	*Analyst:*	*AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time		Analyst	Method
Escherichia Coli:	Absent	Absent	5/29/25	5:00 PM	EB	SM 9222G
Total coliforms:	0/100mls	2/100mls	5/29/25	5:00 PM	EB	SM 9222B
Standard plate count:	0/ml	200/ml	5/29/25	4:40 PM	SL	SM 9215B

Field Analysis	Results	Reporting limit	Date/Time		Analyst	Method
pH:	7.4 SU	7.2 - 7.8 SU	5/29/25	9:55 AM	ZR	DPD
Chlorine:	2.0 mg/l	1.0 - 5.0 mg/l	5/29/25	9:55 AM	ZR	DPD
Turbidity:	1 NTU	1 - 2 NTU	5/29/25	9:55 AM	ZR	Visual

Sample comments

(When exceeding reporting limit pool or spa is unfit)

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Andrea Smith