



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

Lab ID No. 02-04041

W-12

Lab# 2447

**Customer**

Facility Name: *Robinson Twp Pool*  
Address: *115 Robinson Pool Lane  
McKees Rocks, PA 15136*  
Matrix: *Recreational Water*  
Source Type: *Shallow End*

**Sample Collection**

Date: *6/18/25*  
Time: *7:15 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *6/20/25*  
Time: *3:30 PM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	6/18/25 4:05 PM	EB	SM 9222G
Total coliforms:	0/100mls	2/100mls	6/18/25 4:05 PM	EB	SM 9222B
Standard plate count:	0/ml	200/ml	6/18/25 4:05 PM	EB	SM 9215B

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.4 SU	7.2 - 7.8 SU	6/18/25 7:15 AM	VH	DPD
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	6/18/25 7:15 AM	VH	DPD
Turbidity:	1 NTU	1 - 2 NTU	6/18/25 7:15 AM	VH	Visual

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor



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