



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

Lab ID No. 02-04041

E - 13

Lab# 2223

**Customer**

Facility Name: *Gateway Heights*  
Address: *2249 Ramsey Road  
Monroeville, PA 15146*  
Matrix: *Recreational Water*  
Source Type: *Shallow End*

**Sample Collection**

Date: *8/19/25*  
Time: *12:00 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *8/22/25*  
Time: *9:00 AM*  
Analyst: *AS*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time | Analyst  | Method |
|-----------------------|----------|-----------------|----------------------|----------|--------|
| Escherichia Coli:     | Absent   | Absent          | 8/20/25              | 10:05 AM | EB     |
| Total coliforms:      | 0/100mls | 2/100mls        | 8/20/25              | 10:05 AM | EB     |
| Standard plate count: | 0/ml     | 200/ml          | 8/19/25              | 4:45 PM  | EB     |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst  | Method |
|----------------|----------|-----------------|-----------|----------|--------|
| pH:            | 7.6 SU   | 7.2 - 7.8 SU    | 8/19/25   | 12:55 PM | EH     |
| Chlorine:      | 1.0 mg/l | 1.0 - 5.0 mg/l  | 8/19/25   | 12:55 PM | EH     |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 8/19/25   | 12:55 PM | EH     |

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor