



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

Lab ID No. 02-04041

W-12

Lab# 221

Customer

Facility Name: Masonic Village
Address: 1000 Masonic Dr.
Sewickley, PA 15143

Matrix: Recreational Water

Source Type: Spa

Sample Collection

Date: 7/2/25
Time: 11:00 AM
Method: Grab

Sample Final Analysis

Date: 7/4/25
Time: 3:30 PM
Analyst: AS

| Accredited Analysis | Results | Reporting limit | Incubation Date/Time | Analyst | Method |
|---------------------|---------|-----------------|----------------------|---------|--------|
|---------------------|---------|-----------------|----------------------|---------|--------|

| | | | | | |
|-------------------|--------|--------|----------------|----|----------|
| Escherichia Coli: | Absent | Absent | 7/2/25 3:00 PM | EB | SM 9222G |
|-------------------|--------|--------|----------------|----|----------|

| | | | | | |
|------------------|----------|----------|----------------|----|----------|
| Total coliforms: | 0/100mls | 2/100mls | 7/2/25 3:00 PM | EB | SM 9222B |
|------------------|----------|----------|----------------|----|----------|

| | | | | | |
|-----------------------|--------|--------|----------------|----|----------|
| Standard plate count: | 130/ml | 200/ml | 7/2/25 3:00 PM | AH | SM 9215B |
|-----------------------|--------|--------|----------------|----|----------|

| Additional Analysis | Results | Reporting limit | Incubation Date/Time | Analyst | Method |
|---------------------|---------|-----------------|----------------------|---------|--------|
|---------------------|---------|-----------------|----------------------|---------|--------|

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|---------------------|----------|----------|----------------|----|----------|
| Fecal Streptococcus | 1/100mls | 2/100mls | 7/2/25 3:10 PM | SL | SM 9230C |
|---------------------|----------|----------|----------------|----|----------|

| Field Analysis | Results | Reporting limit | Date/Time | Analyst | Method |
|----------------|---------|-----------------|-----------|---------|--------|
|----------------|---------|-----------------|-----------|---------|--------|

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|-----|--------|--------------|-----------------|----|-----|
| pH: | 7.4 SU | 7.2 - 7.8 SU | 7/2/25 11:00 AM | VH | DPD |
|-----|--------|--------------|-----------------|----|-----|

| | | | | | |
|-----------|----------|----------------|-----------------|----|-----|
| Chlorine: | 5.0 mg/l | 1.0 - 5.0 mg/l | 7/2/25 11:00 AM | VH | DPD |
|-----------|----------|----------------|-----------------|----|-----|

| | | | | | |
|------------|-------|-----------|-----------------|----|--------|
| Turbidity: | 1 NTU | 1 - 2 NTU | 7/2/25 11:00 AM | VH | Visual |
|------------|-------|-----------|-----------------|----|--------|

Sample comments

Andre Smith

(When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor



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