



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

Lab ID No. 02-04041

**E-3**

**Lab# 471**

**Customer**

Facility Name: *Holiday Inn*  
  
Address: *115 Convention Center Dr.*  
*Duncansville, PA 16635*

**Sample Collection**

Date: *10/20/25*  
Time: *1:30 PM*  
Method: *Grab*

**Sample Final Analysis**

Date: *10/23/25*  
Time: *11:00 AM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time		Analyst	Method
Escherichia Coli:	Absent	Absent	10/21/25	10:30 AM	SL	SM 9222G
Total coliforms:	0/100mls	2/100mls	10/21/25	10:30 AM	SL	SM 9222B
Standard plate count:	0/ml	200/ml	10/20/25	5:40 PM	AS	SM 9215B

Field Analysis	Results	Reporting limit	Date/Time		Analyst	Method
pH:	7.4 SU	7.2 - 7.8 SU	10/20/25	1:30 PM	DNP	DPD
Chlorine:	2.0 mg/l	1.0 - 5.0 mg/l	10/20/25	1:30 PM	DNP	DPD
Turbidity:	1 NTU	1 - 2 NTU	10/20/25	1:30 PM	DNP	Visual

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor