



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

Lab ID No. 02-04041

E-2

Lab# 001

Customer

Facility Name: *Aerobics Center*
Address: *526 New Alexandria Rd.*
Greensburg, PA 15601

Matrix: *Recreational Water*

Source Type: *Pool*

Sample Collection

Date: *12/17/25*
Time: *12:01 PM*
Method: *Grab*

Sample Final Analysis

Date: *1/0/00*
Time: *12:00 AM*
Analyst: *1/0/00*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time		Analyst	Method
Escherichia Coli:	Absent	Absent	12/17/25	4:30 PM	AS	SM 9222G
Total coliforms:	0/100mls	2/100mls	12/17/25	4:30 PM	AS	SM 9222B
Standard plate count:	0/ml	200/ml	12/17/25	4:30 PM	AS	SM 9215B

Field Analysis	Results	Reporting limit	Date/Time		Analyst	Method
pH:	7.6 SU	7.2 - 7.8 SU	12/17/25	12:01 PM	SL	DPD
Chlorine:	1.0 mg/l	1.0 - 5.0 mg/l	12/17/25	12:01 PM	SL	DPD
Turbidity:	1 NTU	1 - 2 NTU	12/17/25	12:01 PM	SL	Visual

Sample comments

Andre Smith, Lead Supervisor

(When exceeding reporting limit pool or spa is unfit)