



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

Lab ID No. 02-04041

N-2

Lab# 135

**Customer**

Facility Name: *Hampton School District*

**Sample Collection**

Date: 10/1/25

Time: 1:01 PM

Method: Grab

Address: *2929 McCully Rd.  
Allison Park, PA 15101*

**Sample Final Analysis**

Date: 10/3/25

Time: 5:30 PM

Analyst: AS

Matrix: *Recreational Water*

Source Type: *Pool Shallow*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time | Analyst | Method      |
|-----------------------|----------|-----------------|----------------------|---------|-------------|
| Escherichia Coli:     | Absent   | Absent          | 10/1/25              | 5:20 PM | SL SM 9222G |
| Total coliforms:      | 0/100mls | 2/100mls        | 10/1/25              | 5:20 PM | SL SM 9222B |
| Standard plate count: | 0/ml     | 200/ml          | 10/1/25              | 4:10 PM | SL SM 9215B |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst | Method    |
|----------------|----------|-----------------|-----------|---------|-----------|
| pH:            | 7.2 SU   | 7.2 - 7.8 SU    | 10/1/25   | 1:01 PM | SL DPD    |
| Chlorine:      | 3.0 mg/l | 1.0 - 5.0 mg/l  | 10/1/25   | 1:01 PM | SL DPD    |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 10/1/25   | 1:01 PM | SL Visual |

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor