



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

Lab ID No. 02-04041  
**E - 10**

**Lab# 001**

**Customer**

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

**Matrix:** *Recreational Water*  
**Source Type:** *Pool*

**Sample Collection**

**Date:** *5/29/25*  
**Time:** *1:30 PM*  
**Method:** *Grab*

**Sample Final Analysis**

**Date:** *5/31/25*  
**Time:** *3:30 PM*  
**Analyst:** *AS*

Accredited Analysis	Results	Reporting limit	Incubation	Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	5/29/25	6:05 PM	SL	SM 9222G
Total coliforms:	0/100mls	2/100mls	5/29/25	6:05 PM	SL	SM 9222B
Standard plate count:	0/ml	200/ml	5/29/25	6:05 PM	SL	SM 9215B

Field Analysis	Results	Reporting limit		Date/Time	Analyst	Method
pH:	8.0 SU	7.2 - 7.8 SU	5/29/25	1:30 PM	BH	DPD
Chlorine:	10.0 mg/l	1.0 - 5.0 mg/l	5/29/25	1:30 PM	BH	DPD
Turbidity:	1 NTU	1 - 2 NTU	5/29/25	1:30 PM	BH	Visual

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor



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