



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

Lab ID No. 02-04041

N-17

Lab# 2714

**Customer**

Facility Name: *Duffy Highlands*

Address: *200 Muirfield Ct.  
Butler, PA 16001*

Matrix: *Recreational Water*

Source Type: *Pool*

**Sample Collection**

Date: *8/4/25*

Time: *12:55 PM*

Method: *Grab*

**Sample Final Analysis**

Date: *8/7/25*

Time: *11:20 AM*

Analyst: *AS*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time | Analyst  | Method |
|-----------------------|----------|-----------------|----------------------|----------|--------|
| Escherichia Coli:     | Absent   | Absent          | 8/5/25               | 12:15 PM | AS     |
| Total coliforms:      | 0/100mls | 2/100mls        | 8/5/25               | 12:15 PM | AS     |
| Standard plate count: | 0/ml     | 200/ml          | 8/4/25               | 7:20 PM  | AS     |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst  | Method |
|----------------|----------|-----------------|-----------|----------|--------|
| pH:            | 7.6 SU   | 7.2 - 7.8 SU    | 8/4/25    | 12:55 PM | BH     |
| Chlorine:      | 3.0 mg/l | 1.0 - 5.0 mg/l  | 8/4/25    | 12:55 PM | BH     |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 8/4/25    | 12:55 PM | BH     |

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor



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