

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

Lab ID No. 02-04041

**S-15** 

Lab# 255

Customer				Sample Colle	ction	
Facility Name:	Peters Twp. I	High School		Date:	6/25/25	
Address:	631 East McN Washington,	•		Time: Method:	11:07 AM <i>Grab</i>	
Matrix: Source Type:	Recreational Shallow End	Water		Sample Final Date: Time: Analyst:	<u>Analysis</u> 6/27/25 4:30 PM AS	
Accredited Analysis	Results	Reporting limit	Incubatio	n Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	6/25/25	5:40 PM	EB	SM 9222G
Total coliforms:	0/100mls	2/100mls	6/25/25	5:40 PM	EB	SM 9222B
Standard plate count:	0/ml	200/ml	6/25/25	5:40 PM	EB	SM 9215B
Field Analysis	Results	Reporting limit	D	Date/Time	Analyst	Method
pH:	7.4 SU	7.2 - 7.8 SU	6/25/25	11:07 AM	AF	DPD
Chlorine:	5.0 mg/l	1.0 - 5.0 mg/l	6/25/25	11:07 AM	AF	DPD

6/25/25

1 - 2 NTU

## Sample comments

Turbidity:

( When exceeding reporting limit pool or spa is unfit)

1 NTU

Andre Smith, Lead Supervisor

andre Smith

11:07 AM

ΑF

Visual



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