



**Dreams Pools and Spas**  
**1105 Washington Blvd**  
**Pittsburgh, Pennsylvania 15206** **PPS**  
**(412) 661-7665**  
**Laboratory Analysis Report Lab# 018**

Lab ID No. 02-04041

**Customer**

Facility Name: *Baxter Building*  
Address: *925 Brushton Ave  
Pittsburgh, PA 15208*  
Matrix: *Recreational Water*  
Source Type: *Pool Deep*

**Sample Collection**

Date: *1/20/26*  
Time: *10:32 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *1/23/26*  
Time: *10:30 AM*  
Analyst: *AS*

<b>Accredited Analysis</b>	<b>Results</b>	<b>Rating</b>	<b>Incubation Date/Time</b>	<b>Analyst</b>	<b>Method</b>
Escherichia Coli:	Absent	A	1/21/26	10:00 AM	SL SM 9222G
Total coliforms:	0/100mls	A	1/21/26	10:00 AM	SL SM 9222B
Standard plate count:	0/ml	A	1/20/26	5:30 PM	SL SM 9215B

<b>Field Analysis</b>	<b>Results</b>	<b>Rating</b>	<b>Date/Time</b>	<b>Analyst</b>	<b>Method</b>
pH:	7.6 SU	A	1/20/26	10:32 AM	MM DPD
Chlorine:	2.0 mg/l	B	1/20/26	10:32 AM	MM DPD
Turbidity:	1 NTU	A	1/20/26	10:32 AM	MM Visual

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor

A handwritten signature in black ink that reads "Andre Smith".