



**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*

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

Matrix: *Recreational Water*

Source Type: *Pool Shallow*

**Sample Collection**

Date: *1/7/26*

Time: *1:00 PM*

Method: *Grab*

**Sample Final Analysis**

Date: *1/9/26*

Time: *4:00 PM*

Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	1/7/26	3:21 PM	SL SM 9222G
Total coliforms:	0/100mls	2/100mls	1/7/26	3:21 PM	SL SM 9222B
Standard plate count:	0/ml	200/ml	1/6/26	3:21 PM	SL SM 9215B

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.4 SU	7.2 - 7.8 SU	1/7/26	1:00 PM	VH DPD
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	1/7/26	1:00 PM	VH DPD
Turbidity:	1 NTU	1 - 2 NTU	1/7/26	1:00 PM	VH Visual

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

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

Andre Smith, Lead Supervisor