



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

Lab ID No. 02-04041

PPS

Lab# 213

**Customer**

Facility Name: *Langley High School*

Address: *2940 Sheradan Blvd.  
Pittsburgh, PA 15204*

Matrix: *Recreational Water*

Source Type: *Pool Shallow*

**Sample Collection**

Date: *8/18/25*

Time: *2:51 PM*

Method: *Grab*

**Sample Final Analysis**

Date: *8/21/25*

Time: *9:00 AM*

Analyst: *AS*

Accredited Analysis	Results	Rating	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	A	8/19/25	10:00 AM	EB
Total coliforms:	0/100mls	A	8/19/25	10:00 AM	EB
Standard plate count:	0/ml	A	8/18/25	4:20 PM	EB

Field Analysis	Results	Rating	Date/Time	Analyst	Method
pH:	7.5 SU	A	8/18/25	2:51 PM	ZS
Chlorine:	4.0 mg/l	B	8/18/25	2:51 PM	ZS
Turbidity:	1 NTU	A	8/18/25	2:51 PM	ZS

**Sample comments**

*Andre Smith*

( When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor