



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

Lab ID No. 02-04041

E - 13

Lab# 109

**Customer**

Facility Name: *Gateway High School*  
Address: *3000 Gateway Campus Blvd.  
Monroeville, PA 15146*  
Matrix: *Recreational Water*  
Source Type: *Shallow End*

**Sample Collection**

Date: *7/15/25*  
Time: *10:40 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *7/18/25*  
Time: *9:30 AM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	7/16/25	9:35 AM	EB
Total coliforms:	0/100mls	2/100mls	7/16/25	9:35 AM	EB
Standard plate count:	0/ml	200/ml	7/15/25	3:28 PM	AH

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.8 SU	7.2 - 7.8 SU	7/15/25	10:40 AM	EH
Chlorine:	2.0 mg/l	1.0 - 5.0 mg/l	7/15/25	10:40 AM	EH
Turbidity:	1 NTU	1 - 2 NTU	7/15/25	10:40 AM	EH

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor



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