



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

Lab ID No. 02-04041

S-13

Lab# 370

**Customer**

Facility Name: *Fairfield Inn & Suites*  
Address: *189 Finley Road  
Belle Vernon, PA 15012*  
Matrix: *Recreational Water*  
Source Type: *Pool*

**Sample Collection**

Date: *8/4/25*  
Time: *10:45 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *8/7/25*  
Time: *11:20 AM*  
Analyst: *AS*

<b>Accredited Analysis</b>	<b>Results</b>	<b>Reporting limit</b>	<b>Incubation Date/Time</b>	<b>Analyst</b>	<b>Method</b>
Escherichia Coli:	Absent	Absent	8/5/25	11:50 AM	AH
Total coliforms:	0/100mls	2/100mls	8/5/25	11:50 AM	AH
Standard plate count:	0/ml	200/ml	8/4/25	5:30 PM	AS

<b>Field Analysis</b>	<b>Results</b>	<b>Reporting limit</b>	<b>Date/Time</b>	<b>Analyst</b>	<b>Method</b>
pH:	7.4 SU	7.2 - 7.8 SU	8/4/25	10:45 AM	SH
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	8/4/25	10:45 AM	SH
Turbidity:	1 NTU	1 - 2 NTU	8/4/25	10:45 AM	SH

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor



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