



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

Lab ID No. 02-04041

W-1

Lab# 405

**Customer**

Facility Name: *Home 2 Suites Beaver Valley*

Address: *1000 Wagner Road Extension South  
Monaca, PA 15061*

Matrix: *Recreational Water*

Source Type: *Pool*

**Sample Collection**

Date: *10/27/25*

Time: *1:42 PM*

Method: *Grab*

**Sample Final Analysis**

Date: *10/30/25*

Time: *10:30 AM*

Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method	
Escherichia Coli:	Absent	Absent	10/28/25	10:00 AM	JC	SM 9222G
Total coliforms:	0/100mls	2/100mls	10/28/25	10:00 AM	JC	SM 9222B
Standard plate count:	0/ml	200/ml	10/27/25	5:15 PM	AS	SM 9215B

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method	
pH:	7.6 SU	7.2 - 7.8 SU	10/27/25	1:42 PM	AMH	DPD
Chlorine:	1.0 mg/l	1.0 - 5.0 mg/l	10/27/25	1:42 PM	AMH	DPD
Turbidity:	1 NTU	1 - 2 NTU	10/27/25	1:42 PM	AMH	Visual

**Sample comments**

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

( When exceeding reporting limit pool or spa is unfit)

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Andre Smith, Lead Supervisor