



**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: *5/29/25*
Time: *2:09 PM*
Method: *Grab*

Sample Final Analysis

Date: *5/31/25*
Time: *3:30 PM*
Analyst: *AS*

| Accredited Analysis | Results | Reporting limit | Incubation Date/Time | Analyst | Method |
|-----------------------|----------|-----------------|----------------------|---------|--------|
| Escherichia Coli: | Absent | Absent | 5/29/25 | 5:00 PM | EB |
| Total coliforms: | 0/100mls | 2/100mls | 5/29/25 | 5:00 PM | EB |
| Standard plate count: | 0/ml | 200/ml | 5/29/25 | 4:40 PM | SL |

| Field Analysis | Results | Reporting limit | Date/Time | Analyst | Method |
|----------------|----------|-----------------|-----------|---------|--------|
| pH: | 8.0 SU | 7.2 - 7.8 SU | 5/29/25 | 2:09 PM | ZR |
| Chlorine: | 2.0 mg/l | 1.0 - 5.0 mg/l | 5/29/25 | 2:09 PM | ZR |
| Turbidity: | 1 NTU | 1 - 2 NTU | 5/29/25 | 2:09 PM | ZR |

Sample comments

(When exceeding reporting limit pool or spa is unfit)

Andre Smith

Andre Smith, Lead Supervisor



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(When exceeding reporting limit pool or spa is unfit)

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

Andre Smith, Lead Supervisor