



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

Lab ID No. 02-04041

E - 12

Lab# 2233

**Customer**

Facility Name: Green Oaks C.C.

Address: 5741 3rd Street  
Verona, PA 15147

Matrix: Recreational Water

Source Type: Deep End

**Sample Collection**

Date: 6/10/25

Time: 1:50 PM

Method: Grab

**Sample Final Analysis**

Date: 6/13/25

Time: 9:30 AM

Analyst: AS

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time | Analyst  | Method |          |
|-----------------------|----------|-----------------|----------------------|----------|--------|----------|
| Escherichia Coli:     | Absent   | Absent          | 6/11/25              | 10:00 AM | AH     | SM 9222G |
| Total coliforms:      | 0/100mls | 2/100mls        | 6/11/25              | 10:00 AM | AH     | SM 9222B |
| Standard plate count: | 0/ml     | 200/ml          | 6/10/25              | 3:12 PM  | EB     | SM 9215B |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst | Method |        |
|----------------|----------|-----------------|-----------|---------|--------|--------|
| pH:            | 7.4 SU   | 7.2 - 7.8 SU    | 6/10/25   | 1:50 PM | EH     | DPD    |
| Chlorine:      | 2.0 mg/l | 1.0 - 5.0 mg/l  | 6/10/25   | 1:50 PM | EH     | DPD    |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 6/10/25   | 1:50 PM | EH     | Visual |

**Sample comments**

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

(When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor



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**Sample comments**

A handwritten signature in black ink that reads "Andre Smith". The signature is fluid and cursive, with "Andre" on the first line and "Smith" on the second line.

(When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor