



**Dreams Pools and Spas**  
**1105 Washington Blvd**  
**Pittsburgh, Pennsylvania 15206**      **PPS**  
**(412) 661-7665**  
**Laboratory Analysis Report**      *Lab# 059*

Lab ID No. 02-04041

**Customer**

Facility Name: *Colfax Elementary*

Address: *2332 Beechwood Blvd.  
Pittsburgh, PA 15217*

Matrix: *Recreational Water*

Source Type: *Pool Shallow*

**Sample Collection**

Date: *12/8/25*

Time: *12:32 PM*

Method: *Grab*

**Sample Final Analysis**

Date: *12/11/25*

Time: *11:30 AM*

Analyst: *AS*

Accredited Analysis	Results	Rating	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	A	12/9/25	11:10 AM	JC
Total coliforms:	0/100mls	A	12/9/25	11:10 AM	JC
Standard plate count:	0/ml	A	12/8/25	5:30 PM	SL

Field Analysis	Results	Rating	Date/Time	Analyst	Method
pH:	7.4 SU	A	12/8/25	12:32 PM	MM
Chlorine:	3.0 mg/l	A	12/8/25	12:32 PM	MM
Turbidity:	1 NTU	A	12/8/25	12:32 PM	Visual

**Sample comments**

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

Andre Smith, Lead Supervisor

( When exceeding reporting limit pool or spa is unfit)