



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

Lab ID No. 02-04041

S-3

Lab# 124

**Customer**

Facility Name: *Hampton Inn*  
Address: *475 Johnson Rd.  
Washington, PA 15301*  
Matrix: *Recreational Water*  
Source Type: *Pool*

**Sample Collection**

Date: *9/2/25*  
Time: *10:55 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *9/5/25*  
Time: *10:00 AM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method	
Escherichia Coli:	Absent	Absent	9/3/25	10:00 AM	SL	SM 9222G
Total coliforms:	0/100mls	2/100mls	9/3/25	10:00 AM	SL	SM 9222B
Standard plate count:	0/ml	200/ml	9/2/25	3:50 PM	AS	SM 9215B

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method	
pH:	7.0 SU	7.2 - 7.8 SU	9/2/25	10:55 AM	GR	DPD
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	9/2/25	10:55 AM	GR	DPD
Turbidity:	1 NTU	1 - 2 NTU	9/2/25	10:55 AM	GR	Visual

( When exceeding reporting limit pool or spa is unfit)

A handwritten signature in black ink that reads "Andre Smith". Below the signature, the text "Andre Smith, Lead Supervisor" is printed in a smaller, sans-serif font.