



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

Lab ID No. 02-04041

E - 13

Lab# 454

**Customer**

Facility Name: *Hampton Inn*  
Address: *3000 Mossside Blvd.  
Monroeville, PA 15146*  
Matrix: *Recreational Water*  
Source Type: *Pool*

**Sample Collection**

Date: *7/8/25*  
Time: *12:18 PM*  
Method: *Grab*

**Sample Final Analysis**

Date: *7/11/25*  
Time: *9:00 AM*  
Analyst: *AS*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time | Analyst | Method |
|-----------------------|----------|-----------------|----------------------|---------|--------|
| Escherichia Coli:     | Absent   | Absent          | 7/9/25               | 9:00 AM | EB     |
| Total coliforms:      | 0/100mls | 2/100mls        | 7/9/25               | 9:00 AM | EB     |
| Standard plate count: | 0/ml     | 200/ml          | 7/8/25               | 3:28 PM | AH     |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst  | Method |
|----------------|----------|-----------------|-----------|----------|--------|
| pH:            | 7.6 SU   | 7.2 - 7.8 SU    | 7/8/25    | 12:18 PM | EH     |
| Chlorine:      | 1.0 mg/l | 1.0 - 5.0 mg/l  | 7/8/25    | 12:18 PM | EH     |
| Turbidity:     | 2 NTU    | 1 - 2 NTU       | 7/8/25    | 12:18 PM | EH     |

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

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

Andre Smith, Lead Supervisor



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