



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

Lab ID No. 02-04041

N-16

Lab# 2662

**Customer**

Facility Name: *Hampton Twp*  
Address: *3101 McCully Rd.  
Allison Park, PA 15101*  
Matrix: *Recreational Water*  
Source Type: *Shallow End*

**Sample Collection**

Date: *6/2/25*  
Time: *11:42 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *6/5/25*  
Time: *9:30 AM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	6/3/25	10:30 AM	EB
Total coliforms:	0/100mls	2/100mls	6/3/25	10:30 AM	EB
Standard plate count:	0/ml	200/ml	6/2/25	6:30 PM	SL

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.4 SU	7.2 - 7.8 SU	6/2/25	11:42 AM	GR
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	6/2/25	11:42 AM	GR
Turbidity:	1 NTU	1 - 2 NTU	6/2/25	11:42 AM	GR

**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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