



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

Lab ID No. 02-04041

**W-10**

**Lab# 2680**

**Customer**

Facility Name: Club @ Shadow Lakes  
Address: 2000 Beaver Lakes Blvd.  
Aliquippa, PA 15001

**Sample Collection**

Date: 7/28/25  
Time: 10:37 AM  
Method: Grab

**Sample Final Analysis**

Date: 7/31/25  
Time: 9:00 AM  
Analyst: AS

Matrix: Recreational Water

Source Type: Wading Pool

| Accredited Analysis   | Results  | Reporting limit | Incubation | Date/Time | Analyst | Method   |
|-----------------------|----------|-----------------|------------|-----------|---------|----------|
| Escherichia Coli:     | Absent   | Absent          | 7/29/25    | 11:30 AM  | AH      | SM 9222G |
| Total coliforms:      | 0/100mls | 2/100mls        | 7/29/25    | 11:30 AM  | AH      | SM 9222B |
| Standard plate count: | 0/ml     | 200/ml          | 7/28/25    | 7:15 PM   | SL      | SM 9215B |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst  | Method |        |
|----------------|----------|-----------------|-----------|----------|--------|--------|
| pH:            | 7.8 SU   | 7.2 - 7.8 SU    | 7/28/25   | 10:37 AM | AH     | DPD    |
| Chlorine:      | 0.0 mg/l | 1.0 - 5.0 mg/l  | 7/28/25   | 10:37 AM | AH     | DPD    |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 7/28/25   | 10:37 AM | AH     | Visual |

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor



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