



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

Lab ID No. 02-04041

S-1

Lab# 445

**Customer**

Facility Name: *Highpoint Fitness*  
Address: *1000 Higbee Dr.  
Bethel Park, PA 15102*

Matrix: *Recreational Water*  
Source Type: *Spa*

**Sample Collection**

Date: *11/18/25*  
Time: *1:13 PM*  
Method: *Grab*

**Sample Final Analysis**

Date: *11/21/25*  
Time: *10:00 AM*  
Analyst: *AS*

<b>Accredited Analysis</b>	<b>Results</b>	<b>Reporting limit</b>	<b>Incubation Date/Time</b>		<b>Analyst</b>	<b>Method</b>
Escherichia Coli:	Absent	Absent	11/19/25	10:30 AM	AS	SM 9222G
Total coliforms:	0/100mls	2/100mls	11/19/25	10:30 AM	AS	SM 9222B
Standard plate count:	0/ml	200/ml	11/18/25	5:50 PM	SL	SM 9215B
<b>Additional Analysis</b>	<b>Results</b>	<b>Reporting limit</b>	<b>Incubation Date/Time</b>		<b>Analyst</b>	<b>Method</b>
Fecal Streptococcus	0/100mls	2/100mls	12:00 AM	10:20 AM	AS	SM 9213C
<b>Field Analysis</b>	<b>Results</b>	<b>Reporting limit</b>	<b>Date/Time</b>		<b>Analyst</b>	<b>Method</b>
pH:	7.7 SU	7.2 - 7.8 SU	11/18/25	1:13 PM	MM	DPD
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	11/18/25	1:13 PM	MM	DPD
Turbidity:	1 NTU	1 - 2 NTU	11/18/25	1:13 PM	MM	Visual

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor