



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

Lab ID No. 02-04041

N-3

Lab# 298

**Customer**

Facility Name: *Town Place Suites*

Address: *2785 Freeport Rd  
Harmar, PA 15238*

Matrix: *Recreational Water*

Source Type: *Pool*

**Sample Collection**

Date: *10/7/25*

Time: *4:18 PM*

Method: *Grab*

**Sample Final Analysis**

Date: *10/10/25*

Time: *11:30 AM*

Analyst: *AS*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time | Analyst  | Method |          |
|-----------------------|----------|-----------------|----------------------|----------|--------|----------|
| Escherichia Coli:     | Absent   | Absent          | 10/8/25              | 11:00 AM | JC     | SM 9222G |
| Total coliforms:      | 0/100mls | 2/100mls        | 10/8/25              | 11:00 AM | JC     | SM 9222B |
| Standard plate count: | 0/ml     | 200/ml          | 10/7/25              | 5:30 PM  | AS     | SM 9215B |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst | Method |        |
|----------------|----------|-----------------|-----------|---------|--------|--------|
| pH:            | 7.0 SU   | 7.2 - 7.8 SU    | 10/7/25   | 4:18 PM | SL     | DPD    |
| Chlorine:      | 1.0 mg/l | 1.0 - 5.0 mg/l  | 10/7/25   | 4:18 PM | SL     | DPD    |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 10/7/25   | 4:18 PM | SL     | Visual |

**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