



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

Lab ID No. 02-04041

N - 1

Lab# 389

**Customer**

Facility Name: *Fairfield Inn & Suites*  
Address: *1000 University Parkway  
Slippery Rock, PA 16057*  
Matrix: *Recreational Water*  
Source Type: *Pool*

**Sample Collection**

Date: *12/15/25*  
Time: *3:05 PM*  
Method: *Grab*

**Sample Final Analysis**

Date: *12/18/25*  
Time: *11:30 AM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	12/16/25	11:00 AM	AS
Total coliforms:	0/100mls	2/100mls	12/16/25	11:00 AM	AS
Standard plate count:	0/ml	200/ml	12/15/25	5:40 PM	AS

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.6 /SU	7.2 - 7.8 SU	12/15/25	3:05 PM	BH
Chlorine:	1.0 mg/l	1.0 - 5.0 mg/l	12/15/25	3:05 PM	BH
Turbidity:	1 NTU	1 - 2 NTU	12/15/25	3:05 PM	Visual

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor