



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

Lab ID No. 02-04041

S-13

Lab# 267

**Customer**

Facility Name: *Ringold High School*  
Address: *1 Ram Drive,  
Monongahela, Pa 15063*  
Matrix: *Recreational Water*  
Source Type: *Pool*

**Sample Collection**

Date: *8/18/25*  
Time: *2:30 PM*  
Method: *Grab*

**Sample Final Analysis**

Date: *8/21/25*  
Time: *9:00 AM*  
Analyst: *AS*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time | Analyst  | Method |
|-----------------------|----------|-----------------|----------------------|----------|--------|
| Escherichia Coli:     | Absent   | Absent          | 8/19/25              | 10:00 AM | SL     |
| Total coliforms:      | 0/100mls | 2/100mls        | 8/19/25              | 10:00 AM | SL     |
| Standard plate count: | 0/ml     | 200/ml          | 8/18/25              | 5:45 PM  | SL     |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst | Method |
|----------------|----------|-----------------|-----------|---------|--------|
| pH:            | 7.6 SU   | 7.2 - 7.8 SU    | 8/18/25   | 2:30 PM | SH     |
| Chlorine:      | 2.0 mg/l | 1.0 - 5.0 mg/l  | 8/18/25   | 2:30 PM | SH     |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 8/18/25   | 2:30 PM | SH     |

**Sample comments**

*Andre Smith*

( When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor