



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

Lab ID No. 02-04041

C-2

Lab# 117

**Customer**

Facility Name: *Hampton Inn*  
Address: *1247 Smallman St.  
Pittsburgh, PA 15222*  
Matrix: *Recreational Water*  
Source Type: *Spa*

**Sample Collection**

Date: *12/9/25*  
Time: *10:15 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *12/12/25*  
Time: *9:30 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	12/10/25	9:00 AM	SL SM 9222G
Total coliforms:	0/100mls	2/100mls	12/10/25	9:00 AM	SL SM 9222B
Standard plate count:	0/ml	200/ml	12/9/25	5:00 PM	AS 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	12/10/25	11:00 AM	SL SM 9230C

<b>Field Analysis</b>	<b>Results</b>	<b>Reporting limit</b>	<b>Date/Time</b>	<b>Analyst</b>	<b>Method</b>
pH:	7.0 SU	7.2 - 7.8 SU	12/9/25	10:15 AM	BH DPD
Chlorine:	10.0 mg/l	1.0 - 5.0 mg/l	12/9/25	10:15 AM	BH DPD
Turbidity:	1 NTU	1 - 2 NTU	12/9/25	10:15 AM	BH Visual

**Sample comments**

*Andre Smith*

Andre Smith, Lead Supervisor

( When exceeding reporting limit pool or spa is unfit)