



**Dreams Pools and Spas**  
**1105 Washington Blvd**  
**Pittsburgh, Pennsylvania 15206** **PPS**  
**(412) 661-7665**  
**Laboratory Analysis Report Lab# 253**

Lab ID No. 02-04041

**Customer**

Facility Name: *Perry Traditional Academy*

Address: *3875 Perrysville Ave.  
Pittsburgh, PA 15214*

Matrix: *Recreational Water*

Source Type: *Pool Shallow*

**Sample Collection**

Date: *12/15/25*

Time: *2:11 PM*

Method: *Grab*

**Sample Final Analysis**

Date: *12/18/25*

Time: *11:30 AM*

Analyst: *AS*

<b>Accredited Analysis</b>	<b>Results</b>	<b>Rating</b>	<b>Incubation Date/Time</b>	<b>Analyst</b>	<b>Method</b>
Escherichia Coli:	Absent	A	12/16/25	11:00 AM	AS
Total coliforms:	0/100mls	A	12/16/25	11:00 AM	AS
Standard plate count:	0/ml	A	12/15/25	5:40 PM	AS

<b>Field Analysis</b>	<b>Results</b>	<b>Rating</b>	<b>Date/Time</b>	<b>Analyst</b>	<b>Method</b>
pH:	7.6 SU	A	12/15/25	2:11 PM	MM
Chlorine:	4.0 mg/l	B	12/15/25	2:11 PM	MM
Turbidity:	1 NTU	A	12/15/25	2:11 PM	Visual

**Sample comments**

A handwritten signature in black ink that reads "Andre Smith".

Andre Smith, Lead Supervisor

( When exceeding reporting limit pool or spa is unfit)