



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

Lab ID No. 02-04041

N-3

Lab# 146

**Customer**

Facility Name: *Highland High School*  
Address: *1500 Pacific Ave.  
Natrona Heights, PA 15065*  
Matrix: *Recreational Water*  
Source Type: *Pool Deep*

**Sample Collection**

Date: *1/13/26*  
Time: *2:00 PM*  
Method: *Grab*

**Sample Final Analysis**

Date: *1/16/26*  
Time: *11:30 AM*  
Analyst: *AS*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time | Analyst  | Method |
|-----------------------|----------|-----------------|----------------------|----------|--------|
| Escherichia Coli:     | Absent   | Absent          | 1/14/26              | 11:00 AM | JC     |
| Total coliforms:      | 0/100mls | 2/100mls        | 1/14/26              | 11:00 AM | JC     |
| Standard plate count: | 0/ml     | 200/ml          | 1/13/26              | 5:15 PM  | SL     |

| Field Analysis | Results  | Reporting limit | Date/Time | Analyst | Method |
|----------------|----------|-----------------|-----------|---------|--------|
| pH:            | 7.6 SU   | 7.2 - 7.8 SU    | 1/13/26   | 2:00 PM | AMH    |
| Chlorine:      | 5.0 mg/l | 1.0 - 5.0 mg/l  | 1/13/26   | 2:00 PM | AMH    |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 1/13/26   | 2:00 PM | AMH    |

**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