



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

Lab ID No. 02-04041

C-11

Lab# 155

**Customer**

Facility Name: *Holiday Inn*  
Address: *20 S 10th St.  
Pittsburgh, PA 15203*  
Matrix: *Recreational Water*  
Source Type: *Pool*

**Sample Collection**

Date: *5/28/25*  
Time: *3:15 PM*  
Method: *Grab*

**Sample Final Analysis**

Date: *5/31/25*  
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	5/29/25	10:40 AM	EB
Total coliforms:	0/100mls	2/100mls	5/29/25	10:40 AM	EB
Standard plate count:	0/ml	200/ml	5/28/25	6:25 PM	AH

<b>Field Analysis</b>	<b>Results</b>	<b>Reporting limit</b>	<b>Date/Time</b>	<b>Analyst</b>	<b>Method</b>
pH:	7.6 SU	7.2 - 7.8 SU	5/28/25	3:15 PM	LM
Chlorine:	1.0 mg/l	1.0 - 5.0 mg/l	5/28/25	3:15 PM	LM
Turbidity:	1 NTU	1 - 2 NTU	5/28/25	3:15 PM	LM

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor



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