



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

Lab ID No. 02-04041

W-13

Lab# 2557

Customer

Facility Name: *Virginia Hills West*
Address: *200 Falls Church Rd.
Imperial, PA 15126*

Matrix: *Recreational Water*
Source Type: *Pool*

Sample Collection

Date: *8/5/25*
Time: *9:29 AM*
Method: *Grab*

Sample Final Analysis

Date: *8/8/25*
Time: *8:30 AM*
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	8/6/25	11:15 AM	AH
Total coliforms:	0/100mls	2/100mls	8/6/25	11:15 AM	AH
Standard plate count:	0/ml	200/ml	8/5/25	5:00 PM	AS

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.6 SU	7.2 - 7.8 SU	8/5/25	9:29 AM	AH
Chlorine:	7.5 mg/l	1.0 - 5.0 mg/l	8/5/25	9:29 AM	AH
Turbidity:	1 NTU	1 - 2 NTU	8/5/25	9:29 AM	AH

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



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Andre Smith

Andre Smith, Lead Supervisor