



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

Lab ID No. 02-04041

W-2

Lab# 066

## Laboratory Analysis Report

### Customer

Facility Name: *Comfort Suite*  
Address: *750 Aten Rd.  
Coraopolis, PA 15108*

### Sample Collection

Date: *9/9/25*  
Time: *8:15 AM*  
Method: *Grab*

### Sample Final Analysis

Date: *9/12/25*  
Time: *10:00 AM*  
Analyst: *AS*

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

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	9/10/25	9:30 AM	SL SM 9222G
Total coliforms:	0/100mls	2/100mls	9/10/25	9:30 AM	SL SM 9222B
Standard plate count:	0/ml	200/ml	9/9/25	2:30 PM	AS SM 9215B

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	8.0 SU	7.2 - 7.8 SU	9/9/25	8:15 AM	VH DPD
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	9/9/25	8:15 AM	VH DPD
Turbidity:	1 NTU	1 - 2 NTU	9/9/25	8:15 AM	VH Visual

### 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