



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

Lab ID No. 02-04041

C-2

Lab# 279

**Customer**

Facility Name: *Sheraton Inn*  
Address: *300 W Station Sq. Dr.  
Pittsburgh, PA 15219*

**Sample Collection**

Date: *11/18/25*  
Time: *2:20 PM*  
Method: *Grab*

Matrix: *Recreational Water*

**Sample Final Analysis**

Date: *11/21/25*  
Time: *10:00 AM*

Source Type: *Pool*

Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	11/19/25	10:30 AM	AS
Total coliforms:	0/100mls	2/100mls	11/19/25	10:30 AM	AS
Standard plate count:	0/ml	200/ml	11/18/25	4:04 PM	SL

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.2 SU	7.2 - 7.8 SU	11/18/25	2:20 PM	BH
Chlorine:	2.0 mg/l	1.0 - 5.0 mg/l	11/18/25	2:20 PM	BH
Turbidity:	1 NTU	1 - 2 NTU	11/18/25	2:20 PM	Visual

**Sample comments**

Andre Smith, Lead Supervisor

(When exceeding reporting limit pool or spa is unfit)