



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

Lab ID No. 02-04041

N-17

Lab# 369

**Customer**

Facility Name: *Towne Place Suites Grove city*

Address: *231 Westside Square r.  
Mercer, PA 16137*

Matrix: *Recreational Water*

Source Type: *Pool*

**Sample Collection**

Date: *6/30/25*

Time: *4:00 PM*

Method: *Grab*

**Sample Final Analysis**

Date: *7/3/25*

Time: *9:30 AM*

Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method	
Escherichia Coli:	Absent	Absent	7/1/25	11:00 AM	AH	SM 9222G
Total coliforms:	0/100mls	2/100mls	7/1/25	11:00 AM	AH	SM 9222B
Standard plate count:	0/ml	200/ml	6/30/25	6:00 PM	EB	SM 9215B

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method	
pH:	7.6 SU	7.2 - 7.8 SU	6/30/25	4:00 PM	BH	DPD
Chlorine:	5.0 mg/l	1.0 - 5.0 mg/l	6/30/25	4:00 PM	BH	DPD
Turbidity:	1 NTU	1 - 2 NTU	6/30/25	4:00 PM	BH	Visual

**Sample comments**

A handwritten signature in black ink that reads "Andre Smith". The signature is fluid and cursive, with "Andre" on the first line and "Smith" on the second line.

( When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor



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**Sample comments**

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( When exceeding reporting limit pool or spa is unfit)

Andre Smith, Lead Supervisor