



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

Lab ID No. 02-04041

W-1

Lab# 438

Customer

Facility Name: *Blackhawk H.S.*
Address: *500 Blackhawk Rd.
Beaver Falls, PA 15010*
Matrix: *Recreational Water*
Source Type: *Pool*

Sample Collection

Date: *1/12/26*
Time: *2:20 PM*
Method: *Grab*

Sample Final Analysis

Date: *1/15/26*
Time: *11:30 AM*
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	1/13/26	11:00 AM	JC
Total coliforms:	0/100mls	2/100mls	1/13/26	11:00 AM	JC
Standard plate count:	0/ml	200/ml	1/12/26	4:45 PM	SL

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	8.0 SU	7.2 - 7.8 SU	1/12/26	2:20 PM	AMH
Chlorine:	7.5 mg/l	1.0 - 5.0 mg/l	1/12/26	2:20 PM	AMH
Turbidity:	1 NTU	1 - 2 NTU	1/12/26	2:20 PM	AMH

Sample comments

Andre Smith

Andre Smith, Lead Supervisor

(When exceeding reporting limit pool or spa is unfit)