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

Customer			_Sample Collection_	
Facility Name:	*Ascent 430*		*Date:*	*6/30/25*
			Time:	9:25 AM
Address:	*430 Ascent Dr.*		*Method:*	*Grab*
	Marshall Twp., PA 15086			
			Sample Final Analysis	
Matrix:	*Recreational Water*		*Date:*	*7/3/25*
			Time:	*9:30 AM*
Source Type:	*Pool*		*Analyst:*	*AS*

Accredited Analysis	**Results**	**Reporting limit**	**Incubation Date/Time**		**Analyst**	**Method**
Escherichia Coli:	Absent	Absent	7/1/25	9:00 AM	EB	SM 9222G
Total coliforms:	0/100mls	2/100mls	7/1/25	9:00 AM	EB	SM 9222B
Standard plate count:	0/ml	200/ml	6/30/25	3:15 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	9:25 AM	ZR	DPD
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	6/30/25	9:25 AM	ZR	DPD
Turbidity:	1 NTU	1 - 2 NTU	6/30/25	9:25 AM	ZR	Visual

Sample comments

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Andre Smith, Lead Supervisor

(When exceeding reporting limit pool or spa is unfit)

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