



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

Lab ID No. 02-04041

S-13

Lab# 2127

**Customer**

Facility Name: *Comfort Inn - Belle Vernon*

Address: *4300 State Route 51  
Belle Vernon, PA 15012*

Matrix: *Recreational Water*

Source Type: *Pool*

**Sample Collection**

Date: *6/2/25*

Time: *10:15 AM*

Method: *Grab*

**Sample Final Analysis**

Date: *6/5/25*

Time: *9:30 AM*

Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	6/3/25	10:00 AM	EB
Total coliforms:	0/100mls	2/100mls	6/3/25	10:00 AM	EB
Standard plate count:	0/ml	200/ml	6/2/25	5:40 PM	SL

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	6.8 SU	7.2 - 7.8 SU	6/2/25	10:15 AM	SH
Chlorine:	1.0 mg/l	1.0 - 5.0 mg/l	6/2/25	10:15 AM	SH
Turbidity:	1 NTU	1 - 2 NTU	6/2/25	10:15 AM	SH

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor



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