



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

Lab ID No. 02-04041

N-2

Lab# 013

**Customer**

Facility Name: *Bairel Center*  
Address: *2565 Nicholson Rd.  
Sewickley, PA 15143*

Matrix: *Recreational Water*  
Source Type: *Pool Deep*

**Sample Collection**

Date: *9/24/25*  
Time: *10:15 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *9/26/25*  
Time: *4:00 PM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	9/24/25	3:20 PM	SL SM 9222G
Total coliforms:	0/100mls	2/100mls	9/24/25	3:20 PM	SL SM 9222B
Standard plate count:	0/ml	200/ml	9/24/25	3:20 PM	SL SM 9215B

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.4 SU	7.2 - 7.8 SU	9/24/25	10:15 AM	VH DPD
Chlorine:	3.0 mg/l	1.0 - 5.0 mg/l	9/24/25	10:15 AM	VH DPD
Turbidity:	1 NTU	1 - 2 NTU	9/24/25	10:15 AM	VH Visual

**Sample comments**

(When exceeding reporting limit pool or spa is unfit)

A handwritten signature in black ink that reads "Andre Smith".

Andre Smith, Lead Supervisor