



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

Lab ID No. 02-04041

C-10

Lab# 225

Customer

Facility Name: *Metropolitan*
Address: *537 N Neville St
Pittsburgh, PA 15213*

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

Sample Collection

Date: *7/28/25*
Time: *10:20 AM*
Method: *Grab*

Sample Final Analysis

Date: *7/31/25*
Time: *9:00 AM*
Analyst: *AS*

| Accredited Analysis | Results | Reporting limit | Incubation Date/Time | Analyst | Method |
|-----------------------|----------|-----------------|----------------------|---------|--------|
| Escherichia Coli: | Absent | Absent | 7/29/25 | 9:10 AM | EB |
| Total coliforms: | 0/100mls | 2/100mls | 7/29/25 | 9:10 AM | EB |
| Standard plate count: | 170/ml | 200/ml | 7/28/25 | 2:46 PM | EB |

| Field Analysis | Results | Reporting limit | Date/Time | Analyst | Method |
|----------------|----------|-----------------|-----------|----------|--------|
| pH: | 8.0 SU | 7.2 - 7.8 SU | 7/28/25 | 10:20 AM | LM |
| Chlorine: | 0.0 mg/l | 1.0 - 5.0 mg/l | 7/28/25 | 10:20 AM | LM |
| Turbidity: | 1 NTU | 1 - 2 NTU | 7/28/25 | 10:20 AM | 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



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