



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

Lab ID No. 02-04041

N-2

Lab# 115

**Customer**

Facility Name: *Hampton Inn*  
Address: *2622 Wexford-Bayne Rd.  
Wexford, PA 15090*  
Matrix: *Recreational Water*  
Source Type: *Pool*

**Sample Collection**

Date: *11/5/25*  
Time: *10:45 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *11/7/25*  
Time: *3:30 PM*  
Analyst: *AS*

Accredited Analysis	Results	Reporting limit	Incubation Date/Time	Analyst	Method
Escherichia Coli:	Absent	Absent	11/5/25	3:17 PM	SL SM 9222G
Total coliforms:	0/100mls	2/100mls	11/5/25	3:17 PM	SL SM 9222B
Standard plate count:	0/ml	200/ml	11/5/25	3:17 PM	SL SM 9215B

Field Analysis	Results	Reporting limit	Date/Time	Analyst	Method
pH:	7.8 SU	7.2 - 7.8 SU	11/5/25	10:45 AM	VH DPD
Chlorine:	5.0 mg/l	1.0 - 5.0 mg/l	11/5/25	10:45 AM	VH DPD
Turbidity:	1 NTU	1 - 2 NTU	11/5/25	10:45 AM	VH Visual

**Sample comments**

( When exceeding reporting limit pool or spa is unfit)

*Andre Smith*

Andre Smith, Lead Supervisor