



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

Lab ID No. 02-04041

**W-1**

**Lab# 069**

**Customer**

Facility Name: *Cornell High School*

Address: *1099 Maple St*  
*Coraopolis, PA 15108*

Matrix: *Recreational Water*

Source Type: *Shallow End*

**Sample Collection**

Date: *12/29/25*  
Time: *9:36 AM*  
Method: *Grab*

**Sample Final Analysis**

Date: *1/1/26*  
Time: *10:00 AM*  
Analyst: *AS*

| Accredited Analysis   | Results  | Reporting limit | Incubation Date/Time |         | Analyst | Method   |
|-----------------------|----------|-----------------|----------------------|---------|---------|----------|
| Escherichia Coli:     | Absent   | Absent          | 12/30/25             | 9:50 AM | EB      | SM 9222G |
| Total coliforms:      | 0/100mls | 2/100mls        | 12/30/25             | 9:50 AM | EB      | SM 9222B |
| Standard plate count: | 0/ml     | 200/ml          | 12/29/25             | 5:45 PM | AS      | SM 9215B |

| Field Analysis | Results  | Reporting limit | Date/Time |         | Analyst | Method |
|----------------|----------|-----------------|-----------|---------|---------|--------|
| pH:            | 7.0 SU   | 7.2 - 7.8 SU    | 12/29/25  | 9:36 AM | AMH     | DPD    |
| Chlorine:      | 5.0 mg/l | 1.0 - 5.0 mg/l  | 12/29/25  | 9:36 AM | AMH     | DPD    |
| Turbidity:     | 1 NTU    | 1 - 2 NTU       | 12/29/25  | 9:36 AM | AMH     | Visual |

**Sample comments**

Andre Smith, Lead Supervisor

( When exceeding reporting limit pool or spa is unfit)