



Detailed Application Request

Kjeldahl

Company name: _____

Address: _____

City / Country: _____

Contact person: _____

Title: _____

Telephone: _____

Fax: _____

E-mail: _____

1. Is the customer working according to a BUCHI application note (AN)? yes no

If yes, which one(s)? _____

2. Has the customer to follow norms? yes no

If yes, which one(s)? _____

3. About sample:

a. Type of sample? _____

b. Water content [%]? _____

c. Sample amount in [g] or [mL]? _____

d. Analyte? Nitrogen Protein Ammonia other _____

e. Protein factor? _____

ABOUT DIGESTION:

1. Please select the instrument models for the digestion procedure

Which instrument type is used for digestion?	IR digester					Block digester	
	<input type="checkbox"/>					<input type="checkbox"/>	
Model of IR digester?	K-439	K-435	K-424	B-425	none	other _____	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Model of Block digester?	K-449	K-446	K-438	K-432	K-431	none	other _____
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Model of scrubber?			K-415	K-414	none	other _____	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Model of glass tube?	300 mL		500 mL	micro	Other brand or size _____		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

2. Volume of sulfuric acid for digestion [mL]? _____

3. Type of catalyst?	Titanium (3.71 g)	Titanium micro (1.55 g)	Missouri (5 g)	ECO (4 g)	Copper Micro (1.65 g)	other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

If another catalyst is used please declare its composition (eg. CuSO₄, K₂SO₄, ...)

Number of tablets per glass tube? _____

	yes	no
4. Is the sample expected to foam?	<input type="checkbox"/>	<input type="checkbox"/>
If yes:		
Is a tip of stearic acid added?	<input type="checkbox"/>	<input type="checkbox"/>
Is antifoam tablet (1 g) added?	<input type="checkbox"/>	<input type="checkbox"/>

5. Digestion temperature and time profile?	Step 1	_____ °C	_____ min
	Step 2	_____ °C	_____ min
	Step 3	_____ °C	_____ min
	Step 4	_____ °C	_____ min
	Cooling	_____	_____ min

ABOUT DISTILLATION AND TITRATION:

1. Please select the instrument models for the distillation procedure

Which Distillation unit is used?	K-375	K-370	K-360	K-355	K-350	none	other
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
If working with a K-360, K-355 or K-350 which external titrator is used?				Schott	Methrom	none	other
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Model of autosampler?				K-376		K-371	none
				<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

2. Added Liquids?

a. Volume H ₂ O [mL]?		_____
b. Volume NaOH (32%) [mL]?		_____
c. Volume H ₃ BO ₃ [mL]?		_____
i. Concentration H ₃ BO ₃ ?	4%	2% + 3g KCl/L other
	<input type="checkbox"/>	<input type="checkbox"/> _____
ii. pH of H ₃ BO ₃ at start?		4.65 other
		<input type="checkbox"/> _____
iii. pH of H ₃ BO ₃ at end point?		4.65 other
		<input type="checkbox"/> _____

3. Distillation time [sec]? _____

4. Steam power [%]? _____

5. Type of titration?	Potentiometric	Colorimetric
	<input type="checkbox"/>	<input type="checkbox"/>
a. Indicator?	Sher	none other
	<input type="checkbox"/>	<input type="checkbox"/> _____
b. Type of Titrant?	HCl	H ₂ SO ₄ other
	<input type="checkbox"/>	<input type="checkbox"/> _____
c. Concentration of titrant [mL/L]?		_____
d. Titration algorithm?	optimal	normal
	<input type="checkbox"/>	<input type="checkbox"/>
e. Blank titrant consumption [mL]?		_____
f. Sample and blank titrant consumption [mL]?		_____

If results are available please attach the document to this file.