



CAPITOL NATIONAL BANK

Member FDIC | Equal Housing Lender

[Privacy Statement](#)

Auto Loan Application

First Name:

Last Name:

Submitted on:

Important Information about Procedures for Opening a New Account

Identification Procedures Requirements: To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account.

What this means for you: When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents.

Security Notice:

You should ONLY fill out this form on-line if you are using a browser with the latest security enhancements. If you don't have the latest version, download a copy now. This form is NOT cached (saved in your computer's memory) when you QUIT your browser.

Instructions:

1. Print this loan application and gather the information you'll need.
2. Complete application on-line and click "Submit Application".
3. To safeguard your privacy, QUIT your browser and restart it again after using this form.

This loan application is for personal loans only and is NOT intended for commercial use. A valid social security number is required to apply. Please review and gather the information you will need before completing this form. Upon receipt of the application, we will send you the proper disclosures.

Auto Loan Request

Amount Requested:

Type of Application:

- Individual Applicant
 Joint Applicant

Desired Monthly Payment

or Term Requested:

- 24 mos.
 36 mos.
 48 mos.
 60 mos.
 Other:

Vehicle Description (required)	Year of Vehicle	Make	Model
Purchase Price		Down Payment	Finance Amount
Dealer Name			
Trade-In	<input type="radio"/> Yes <input type="radio"/> No		
Purchasing from Dealer	<input type="radio"/> Yes <input type="radio"/> No		
Creditor of Trade-In			
Applicant			
First Name		Middle Initial	Last Name
Date of Birth		Social Security No.	No. of Dependents
Driver's License No.		Driver's License State	Your E-mail Address
Home Phone		Best Time to Call	Work Phone
Are there any unsatisfied Judgments against you?	<input type="radio"/> Yes <input type="radio"/> No		
Have you been declared bankrupt in the last 7 years?	<input type="radio"/> Yes <input type="radio"/> No		
Residence			
Your Primary Residence:	<input type="radio"/> Own with Mortgage <input type="radio"/> Own Clear <input type="radio"/> Rent <input type="radio"/> Other:		

Address Information	Address Line 1		
	Address Line 2		
	City	State	ZIP Code

Years At Present Address	Your Monthly rate or Mortgage Payment
_____	_____

Years At Previous Address	Your Previous Address
_____	_____

Home Information

Collateral Property Address (If different from above)	Date Purchased
_____	_____

Current Mortgage Holder	Mortgage Holder Phone
_____	_____

Purchase Price	Market Value	Mortgage Balance
_____	_____	_____

Employment

	<input type="radio"/> Employed <input type="radio"/> Unemployed <input type="radio"/> Self-Employed <input type="radio"/> Retired <input type="radio"/> Student
--	---

Your Present Employer	Phone
_____	_____

Address Information	Address Line 1		
	Address Line 2		
	City	State	ZIP Code

Gross Monthly Salary	Your Position	Years There
_____	_____	_____

You do not have to list alimony, child support or separate maintenance income unless you want us to consider it for the purposes of granting and repayment of this credit request.

Other Monthly Income

Source of Other Income

Previous Employer (if less than 3 years at current employer)

Years at Previous Employer

Address Information

Address Line 1

Address Line 2

City

State

ZIP Code

Additional Information

Your Checking Account Number

Institution Name

Your Savings Account Number

Institution Name

Name of Creditor

Approx. Balance

Monthly Payment

Collateral, if any

Total Amount of Other Monthly Payments not listed above:

Assets

Value

Title Held Name

Co-Applicant

First Name

Middle Initial

Last Name

Date of Birth

Social Security No.

No. of Dependents

Driver's License No.

Driver's License State

Your E-mail Address

Home Phone

Best Time To Call

Work Phone

Co-Applicant Residence

Your Primary Residence:

- Own with Mortgage
- Own Clear
- Rent
- Other:

Address Information

Address Line 1

Address Line 2

City

State

ZIP Code

Years At Present Address

Your Monthly Rent or Mortgage Payment

Years At Previous Address

Your Previous Address

Co-Applicant Employment

- Employed
- Self - Employed
- Retired
- Unemployed
- Student

Your Present Employer

Phone

Address Information

Address Line 1

Address Line 2

City

State

ZIP Code

Applicant(s) Statement

Applicant(s) Statement

I/We have completed this request for credit in consideration of **Capitol National Bank** lending to me and/or others upon my guarantee. I/We certify that all information contained herein is accurate and complete to the best of my knowledge.

I/We authorize **Capitol National Bank** to retain property of this application, to rely on the foregoing, to check and verify my credit, employment and salary history, to secure follow up credit reports concerning my credit worthiness and to exchange information about my account with proper persons, creditors and credit bureaus.

I authorize my employer (present and future), bank and other references listed above to release and/or verify information to **Capitol National Bank** at any time. I acknowledge that this application is subject to approval of credit and acceptance by **Capitol National Bank**. Should my request for credit and subsequent loan be approved, I agree to give **Capitol National Bank** written notice immediately upon change of my name, address, employment or any other pertinent information contained herein.

(required)

I/We AGREE with the above statement