

1271 Market Street

Dayton, TN 37321

(423) 570-0280

Auto Loan Application

First Name:	Last Name:
Submitted on:	
Privacy Policy: Our privacy policy protects the privacy of your personally-identifyin	a information that you provide us online.

Applicants should reside in Walker, Catoosa, Dade, Whitfield, and Chattooga Counties In Georgia and Bledsoe, Bradley, Hamilton, Meigs, Rhea, Roane, and Sequatchie Counties in Tennessee. If you reside outside of this area, the approval process will begin with our evaluation of whether we can adequately service your lending needs.

Important Information about Procedures for Opening a New Account

Identification 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" or fax it to (706) 861-8889.
- 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: (required)		
Type of Application: (required)	 Individual Applicant Joint Applicant 	
Desired Monthly Payment		

or Term Requested:	 12 mos. 24 mos. 36 mos. 48 mos. 60 mos. Other: 			
Vehicle Description (required)	Year of Vehicle Make Model Purchas	e Price Down Payment Finance Amount		
Dealer Name				
Trade-In	O Yes O No			
Purchasing from Dealer	O Yes O 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		
Primary Phone	Best Time to Call	Secondary Phone		
Are there any unsatisfied Judgments against you? (required)	O Yes O No			
Have you been declared bankrupt in the last 7 years? (required)	O Yes O No			
	Residence			

Your Primary Residence: (required) Address Information (required)	 Own with Mortgage Own Clear Rent Other: Address Line 1 Address Line 2				
	City	State	ZIP Code		
Years At Present Address		Your Monthly rate	e or Mortgage Payment		
Years At Previous Address			Your Previous Address		
Property Addre	Home Informa	tion	Date Purchased		
Current Mortgage	Holder		Mortgage Holder Phone		
Purchase Price	Market Value		Mortgage Balance		
Employment					
(required)	 Employed Unemployed Self-Employed Retired Student 				
You	r Present Employer		Phone		

	Address Line 1			
Address Information (required)	Address Line 2			
	City	State	ZIP Code	
Gross Monthly Salar	y	Your Position	Years There	
You do not have to list alimony, child su granting and repayment of this credit rec		ance income unless you want u	s to consider it for the purposes of	
Other Monthly Inc	Other Monthly Income So		ource of Other Income	
Previous Employer (if le	ss than 3 years at current	employer)	Years at Previous Employer	
	Address Line 1			
Address Information	Address Line 2			
	City	State	ZIP Code	
Your Check	Additiona ing Account Number	al Information	Institution Name	
Your Saving	gs Account Number		Institution Name	
Name of Creditor	Approx. Balance	Monthly Payment	Collateral, if any	
Total Amount of Other Monthly Payment not listed above:	ts			

Title Held Name Assets Value **Co-Applicant** Middle Initial **First Name** Last Name Date of Birth Social Security No. No. of Dependents Driver's License No. **Driver's License State** Your E-mail Address **Primary Phone Best Time To Call** Secondary Phone **Co-Applicant Residence** Own with Mortgage Own Clear Your Primary Residence: Rent ()Other: () Address Line 1 Address Information Address Line 2 ZIP Code City State Years At Present Address Your Monthly Rent or Mortgage Payment Years At Previous Address Your Previous Address **Co-Applicant Home Information** Property Address (If different from above) **Date Purchased**

Purchase Price	Market Va Co-Applicant Employed Self - Employed Retired Unemployed Student	Ilue Employment	Mortgage Balance	
Your P	 Employed Self - Employed Retired Unemployed 	Employment		
Your P	 Self - Employed Retired Unemployed 			
Your P	Unemployed			
Your P) Student			
Your P				
	Your Present Employer Phone			
	Address Line 1			
Address Information	Address Line 2			
-	City	State	ZIP Code	
Gross Monthly Salary		Your Position	Years There	
You do not have to list alimony, child support granting and repayment of this credit request	t or separate maintenan t.	ce income unless you wa	ant us to consider it for the purposes of	
Other Monthly Income Source of Other Income		Irce of Other Income		
Previous Employer (if less th	nan 3 years at current er	nployer)	Years at Previous Employer	
	Address Line 1			
Address Information	Address Line 2			
	City	State	ZIP Code	

Your Checking 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 H	leld Name	
Applicant(s) Statement Applicant(s) Statement I/We have completed this request for creating guarantee. I/We certify that all information				
I/We authorize Community National Bank employment and salary history, to secure account with proper persons, creditors an	follow up credit reports con			
I authorize my employer (present and futu National Bank at any time. I acknowledge Bank. Should my request for credit and su immediately upon change of my name, ac I/We AGREE with the above statement	that this application is subjusted using the second structure of the second st	ect to approval of credit and acc d, I agree to give Community Na	eptance by Community National tional Bank written notice	
Signature(s)				
	Signature		Date	
Applicant				
Co-Applicant				