



1271 Market Street

Dayton, TN 37321

(423) 570-0280

Personal Loan Application

First Name:

Last Name:

Submitted on:

Privacy Policy:

Our [privacy policy](#) protects the privacy of your personally-identifying 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.

Personal Loan Request

Amount Requested: (required)

Type of Application: (required)

☐ Individual Applicant

☐ Joint Applicant

Purpose of Loan: (required)

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)		<input type="radio"/> Yes <input type="radio"/> No			
Have you been declared bankrupt in the last 7 years? (required)		<input type="radio"/> Yes <input type="radio"/> No			
Residence					
Your Primary Residence: (required)		<input type="radio"/> Own with Mortgage <input type="radio"/> Own Clear <input type="radio"/> Rent <input type="radio"/> Other			
Present Address (required)		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			
_____		_____			
Home Information					
Property Address (If different from above)				Date Purchased	
_____				_____	
Current Mortgage Holder			Mortgage Holder Phone		
_____			_____		

Purchase Price		Market Value		Mortgage Balance	
Employment					
(required)		<div><input type="radio"/> Employed</div> <div><input type="radio"/> Self-Employed</div> <div><input type="radio"/> Unemployed</div> <div><input type="radio"/> Retired</div> <div><input type="radio"/> Student</div>			
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:	<div><input type="radio"/> Own with Mortgage</div> <div><input type="radio"/> Own Clear</div> <div><input type="radio"/> Rent</div> <div><input type="radio"/> Other</div>		
Present Address	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 Home Information			
Property Address (If different from above)		Date Purchased	
_____		_____	
Current Mortgage Holder		Mortgage Holder Phone	
_____		_____	
Purchase Price	Market Value	Mortgage Balance	
_____	_____	_____	
Co-Applicant Employment			
	<div><input type="radio"/> Employed</div> <div><input type="radio"/> Self-Employed</div> <div><input type="radio"/> Unemployed</div> <div><input type="radio"/> Retired</div> <div><input type="radio"/> Student</div>		
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
	Co-Applicant 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	
Applicant(s) Statement			
I/We have completed this request for credit in consideration of Community 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 Community 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 Community National Bank at any time. I acknowledge that this application is subject to approval of credit and acceptance by Community National Bank. Should my request for credit and subsequent loan be approved, I agree to give Community National Bank written notice immediately upon change of my name, address, employment or any other pertinent information contained herein.			
I/We AGREE with the above statement			
Signature(s)			

Signature

Date

Applicant

Co-Applicant