Reset Form

Print Application

Closed End, Secured/Unsecured Credit

CREDIT APPLICATION

IMPORTANT: Please read these directions before completing this Application, and check (✓) the appropriate box below.

☐ If you are applying for individual credit in your own name, and are relying on your own income or assets and not the income or assets of another person as the basis for repayment of the credit requested, complete only Sections A and D. If the requested credit is to be secured, also complete the first part of Section C and Section E.

☐ If you are applying for joint credit with another person, complete all Sections except E, providing information in B about the joint applicant. If the requested credit is to be secured, then complete Section E.
WE INTEND TO APPLY FOR JOINT CREDIT: _____ APPLICANT _____ CO-APPLICANT

☐ If you are applying for individual credit, but are relying on income from alimony, child support, or separate maintenance or on the income or assets of another person as the basis for repayment of the credit requested, complete all Sections except E to the extent possible, providing information in B about the person on whose alimony, support, or maintenance payments or income or assets you are relying. If the requested credit is to be secured, then complete Section E.

To help the government fight the funding of terrorism and money laundering activities, the USA Patriot Act 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, physical address, date of birth, taxpayer identification number and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. We will let you know if additional information is required.

AMOUNT REQUESTED	PAYMENT DATE DESIRED	PROCEEDS OF CREDIT TO BE USED FOR
$		

SECTION A - INFORMATION REGARDING APPLICANT

FULL NAME (Last, First Middle)	BIRTH DATE	HOME PHONE	BUSINESS PHONE Ext.

IF U.S. PERSON: (Complete all that apply)

DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	SOCIAL SECURITY NO. or TAX I.D NO.

STATE ID CARD NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	OTHER (MILITARY ID, TRIBAL ID, ETC.)

IF NON U.S. PERSON: (Complete all that apply)

DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	SOCIAL SECURITY NO. or TAX I.D NO.	STATE ID CARD NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION

PASSPORT NO. & COUNTRY OF ISSUANCE:	INDIVIDUAL TAXPAYER ID NO.	NO TAXPAYER ID NO., BUT HAVE FILED APPLICATION FOR ONE. WHEN FILED:	GOVERNMENT ISSUED DOCUMENT NO. AND COUNTRY OF ISSUANCE:	OTHER

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS (Street, PO Box, City, State, & Zip) or; IF MILITARY, APO OR FPO ADDRESS or; IF N/A, NEXT OF KIN OR FRIEND	HOW LONG AT PRESENT ADDRESS?

PREVIOUS ADDRESS (Street, City, State, & Zip)	HOW LONG AT PREVIOUS ADDRESS?	EMAIL ADDRESS

PRESENT EMPLOYER (Company Name & Address)	OCCUPATION	POSITION OR TITLE	HOW LONG WITH PRESENT EMPLOYER?	NAME OF SUPERVISOR

PREVIOUS EMPLOYER (Company Name & Address)	HOW LONG WITH PREVIOUS EMPLOYER?

YOUR PRESENT **GROSS** SALARY OR COMMISSION	YOUR PRESENT **NET** SALARY OR COMMISSION	NO. DEPENDENTS	AGES OF DEPENDENTS
$ PER	$ PER		

Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.
Alimony, child support, or separate maintenance received under: ☐ Court Order ☐ Written Agreement ☐ Oral Understanding

OTHER INCOME	SOURCES OF OTHER INCOME	Have you ever received credit from us?
$ PER		☐ No ☐ Yes - When?

Is any income listed in this Section likely to be reduced before the credit requested is paid off? ☐ No ☐ Yes (Explain)

Checking Acct. No. . . . . Where? . . . . . .
Savings Acct. No. Where?

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP	TELEPHONE NO. (Include Area Code)

SECTION B - INFORMATION REGARDING JOINT APPLICANT OR OTHER PARTY (Use separate sheets if necessary.)

FULL NAME (Last, First, Middle)	RELATIONSHIP TO APPLICANT (If Any)	BIRTH DATE	HOME PHONE	BUSINESS PHONE Ext.

IF U.S. PERSON: (Complete all that apply)

DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	SOCIAL SECURITY NO. or TAX I.D NO.

STATE ID CARD NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	OTHER (MILITARY ID, TRIBAL ID, ETC.)

IF NON U.S. PERSON: (Complete all that apply)

DRIVERS LICENSE NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION	SOCIAL SECURITY NO. or TAX I.D NO.	STATE ID CARD NO.	STATE	DATE OF ISSUANCE	DATE OF EXPIRATION

PASSPORT NO. & COUNTRY OF ISSUANCE:	INDIVIDUAL TAXPAYER ID NO.	NO TAXPAYER ID NO., BUT HAVE FILED APPLICATION FOR ONE. WHEN FILED:	GOVERNMENT ISSUED DOCUMENT NO. AND COUNTRY OF ISSUANCE:	OTHER

PHYSICAL RESIDENTIAL OR BUSINESS STREET ADDRESS AND MAILING ADDRESS (Street, PO Box, City, State, & Zip) or; IF MILITARY, APO OR FPO ADDRESS or; IF N/A, NEXT OF KIN OR FRIEND	HOW LONG AT PRESENT ADDRESS?

PRESENT EMPLOYER (Company Name & Address)	OCCUPATION	POSITION OR TITLE	HOW LONG WITH PRESENT EMPLOYER?	NAME OF SUPERVISOR

PREVIOUS EMPLOYER (Company Name & Address)	HOW LONG WITH PREVIOUS EMPLOYER?

YOUR PRESENT **GROSS**	**NET** SALARY OR COMMISSION	NO. DEPENDENTS	AGES OF DEPENDENTS
$ PER	$ PER		

Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.
Alimony, child support, or separate maintenance received under: ☐ Court Order ☐ Written Agreement ☐ Oral Understanding

OTHER INCOME	SOURCES OF OTHER INCOME	Has Joint Applicant or Other Party ever received credit from us?
$ PER		☐ No ☐ Yes - When?

Is any income listed in this Section likely to be reduced before the credit requested is paid off? ☐ No ☐ Yes (Explain)

Checking Account No. . . . . Where? . . . . . .
Savings Account No. Where?

NAME & ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU	RELATIONSHIP	TELEPHONE NO. (Include Area Code)

SECTION C - MARITAL STATUS (Do not complete if this is an Application for individual unsecured credit.)

APPLICANT ☐ Married ☐ Separated ☐ Unmarried (Including single, divorced, or widowed)
OTHER PARTY ☐ Married ☐ Separated ☐ Unmarried (Including single, divorced, or widowed)

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SECTION D - ASSET & DEBT INFORMATION

If Section B has been completed, this Section should be completed, giving information about both the Applicant and Joint Applicant or Other Person. Please mark Applicant-related information with an "A". If Section B was not completed, only give information about the Applicant in this Section.

ASSETS OWNED (Use separate sheet if necessary.)

DESCRIPTION OF ASSETS	VALUE	SUBJECT TO DEBT? Yes / No	NAMES OF OWNERS
CASH	$		
AUTOMOBILES (Make, Model, Year) 1.			
2.			
3.			
CASH VALUE OF LIFE INSURANCE (Issuer, Face Value)			
REAL ESTATE (Location, Date Acquired)			
MARKETABLE SECURITIES (Issuer, Type, No. of Shares)			
OTHER (List)			
TOTAL ASSETS	$ 0		

OUTSTANDING DEBTS (Include charge accounts, installment contracts, credit cards, rent, mortgages, etc. Use separate sheet if necessary)

CREDITOR	TYPE OF DEBT OR ACCOUNT NUMBER	NAME IN WHICH ACCOUNT IS CARRIED	ORIGINAL DEBT	PRESENT BALANCE	MONTHLY PAYMENTS	PAST DUE? Yes / No
LANDLORD OR MORTGAGE HOLDER	☐ Rent Payment ☐ Mortgage		(Omit Rent) $	(Omit Rent) $	$	
TOTAL DEBTS			$	$ 0	$ 0	

CREDIT REFERENCES (Paid off Accounts) DATE PAID OFF

			$		

MY AUTO INSURANCE AGENT IS: (Name & Address)

Are you the co-maker, endorser, or guarantor on any loan or contract? ☐ No ☐ Yes - For Whom? To Whom?

Are there any unsatisfied judgments against you? ☐ No ☐ Yes - Amount $ If "Yes", To Whom Owed?

Have you been declared bankrupt in the last 10 years? ☐ No ☐ Yes - Where? Year?

OTHER OBLIGATIONS (For example, liability to pay alimony, child support, separate maintenance. Use separate sheet if necessary.)

SECTION E - SECURED CREDIT (Complete only if credit is to be secured.) Briefly describe the property to be given as security:

PROPERTY DESCRIPTION

NAMES & ADDRESSES OF ALL CO-OWNERS OF THE PROPERTY

IF THE SECURITY IS REAL ESTATE, GIVE THE FULL NAME OF YOUR SPOUSE (if any):

CREDIT DISCLOSURES: An insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity is not a deposit or other obligation of, or guaranteed by, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an investment risk, there is investment risk associated with the insurance product, including the possible loss of value. If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

SIGNATURES

Everything that I have stated in this Application is correct to the best of my knowledge. I understand that you will retain this Application whether or not it is approved. You are authorized to check my credit and employment history and answer questions about your credit experience with me.

APPLICANT'S SIGNATURE DATE

X

Unless I have purchased the insurance product(s) by mail or if the Credit Disclosures are provided electronically, by signing below, I acknowledge that I have received the Credit Disclosures orally at the time I have applied for credit and fully understand the disclosures noted above. I am also being provided with a copy of these disclosures and I acknowledge receipt by my signature.

OTHER SIGNATURE (Where Applicable) DATE

X

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Reset Form

Print Application

COMMUNITY NATIONAL BANK & TRUST

Member FDIC

FEDERAL CONSUMER CREDIT DISCLOSURES

CREDIT DISCLOSURES: An insurance product or annuity may be offered to you. If you purchase an insurance product or an annuity: (1) The insurance product or annuity is not a deposit or other obligation of, or guaranteed by, this institution or our affiliate(s); (2) With exception of Federal Flood Insurance or Federal Crop Insurance, the insurance product or annuity is not insured by the Federal Deposit Insurance Corporation or any other agency of the United States, this institution, or our affiliate(s); and (3) In the case of an insurance product or annuity that involves an investment risk, there is investment risk associated with the insurance product, including the possible loss of value. If an insurance product or annuity is offered we cannot condition an extension of credit on either of the following: (1) Your purchase of an insurance product or annuity from us or any of our affiliates; or, (2) Your agreement not to obtain, or a prohibition on you from obtaining, an insurance product or annuity from an unaffiliated entity.

INSTRUCTIONS

After completing this application please deliver to one of our banking centers that is most convenient for you. If you need assistance in completing this application please feel free to call a banking center of your choice listed under locations.

We sincerely appreciate the opportunity to serve you.

CUSTOMER COPY - PLEASE RETAIN THIS PORTION FOR YOUR RECORDS

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