

## **The complaint**

Ms S complains about the delays when she claimed on her home insurance policy with Aviva Insurance Limited following an escape of water.

## **What happened**

Ms S said she was away from home and returned on 19 December 2022. When she returned home, she discovered a leak coming from the attic and asked a neighbour to help stop the leak. Ms S then contacted Aviva to claim on her policy for the damage caused by the leak.

In January 2023, Aviva attended Ms S's property and reviewed the claim. It identified a burst valve as the cause of the leak and determined it was most likely damaged by the water within the pipe freezing. Aviva said this was most likely due to the heating and hot water not being turned on, or not on for long enough to prevent the water freezing. When Aviva reviewed the claim, it had concerns Ms S had been away from the property for more than 30 days, which would breach the policy terms, and so looked into this further.

Aviva noted Ms S had strong links to two other properties and so thought one of those was most likely Ms S's main residence. Aviva asked Ms S about this and she said that, while she had links to the other properties, the house with the escape of water was her main residence. Aviva asked Ms S for additional information to enable it to verify the claim. As Ms S wasn't happy with how long the claim was taken, she complained to Aviva.

Aviva reviewed the complaint and issued its final response letter on 14 July 2023 where it didn't uphold the complaint. Aviva said it was working with Ms S to move the claim forward but it still required Ms S's assistance and asked Ms S to work with them to move it forward. Unhappy with Aviva's response Ms S referred her complaint here in January 2024. She said it had been over 12 months since her claim and Aviva still hadn't made a decision on whether her claim was covered.

Our Investigator reviewed the complaint and didn't recommend it be upheld. She explained that she could only consider the delays up until Aviva issued its final response on 14 July 2023. Our Investigator found that Aviva had questions over Ms S's claim and had been waiting on information from her when it issued its final response. Because of this, she didn't think Aviva had unfairly delayed the claim.

Ms S didn't agree, she said she'd fully co-operated with Aviva and it was taking too long to deal with her claim. Ms S provided further information to support this which our Investigator reviewed. However, she found there was still information Aviva needed when it issued its final response letter. Specifically, information around Ms S's dates of residency at her other addresses and information around her driving licence.

As Ms S didn't agree the complaint has come to me to decide.

## **What I've decided – and why**

I've considered all the available evidence and arguments to decide what's fair and reasonable in the circumstances of this complaint.

Before I explain my findings, I would like to confirm that in this decision I'm only considering what happened up until the point Aviva issued its final response letter dated 14 July 2023. This is because anything which has happened after this date would need to be raised with Aviva before this service can investigate them. I appreciate Ms S is unhappy with how long the claim has taken following this final response letter, however, any concerns about what happened after that date will need to be raised separately.

Under industry guidelines Aviva is required to deal with claims promptly and fairly. I've therefore, looked at whether it has done so here. Aviva doesn't agree there has been delays and has said the time taken to deal with Ms S's claim was due to it needing to validate the claim and waiting on information from Ms S. I've considered the timeline of the claim and it's clear there have been occasions where Aviva could have progressed the claim better than it has but I'm not going to tell Aviva to do anything further.

I say this because while home insurance claims can take some time, I can also see the issue Ms S has been claiming for had been going on for around six months when Aviva issued its final response letter. I'm satisfied it's fair and reasonable for Aviva to validate any claims. Furthermore, given the concerns raised by Aviva in relation to Ms S's occupancy I'm satisfied it acted fairly and reasonably by requesting further information to enable it to validate her claim. And as it hadn't received the information it needed I'm not persuaded any failings in Aviva's handling has resulted in the claim taking longer than it should.

I can see Ms S provided a response to our Investigator which she says shows she had fully co-operated with Aviva and included a copy of a letter she sent Aviva dated 12 June 2023 to show this. However, within that letter Ms S also confirmed that she was still waiting for information from the DVLA about her driving licence and said she would send it in as soon as it had been received. I've not been provided with any other evidence to show this information was then provided to Aviva before it issued its final response letter. I'm therefore satisfied that Aviva was still waiting on information to validate the claim when it issued its final response letter. And while I know this will be a disappointment to Ms S, I'm not persuaded that Aviva had unfairly delayed Ms S's claim when it issued its final response letter in July 2023.

## **My final decision**

For the reasons explained above, my final decision is that I don't uphold this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Ms S to accept or reject my decision before 18 October 2024.

Alex Newman  
**Ombudsman**