

The complaint

Ms H has complained about the service received from PIB Risk Services Limited trading as PIB Insurance Brokers (PIB) in regard to her home insurance policy.

What happened

The details of what happened are well known to both parties. So, I will just summarise them here.

- Ms H had a home insurance policy taken out through PIB as the broker but underwritten by a third-party insurer.
- PIB say that whilst the policy renewed in May 2024, they noticed at the start of October 2024 that no premium had been collected.
- PIB then discussed this with the insurer who confirmed they would reinstate and honour the policy from renewal but would need to collect the premiums that had been missed. PIB say they agreed to communicate this to Ms H and did so at the end of October 2024.
- The insurer acknowledged it was their error that no premium had been taken. Ms H was unhappy and requested proof of continuous cover and that the missed premiums would have no impact on her credit file. She continued to communicate through PIB.
- The missed premium of approximately £380 was taken by the insurer and Ms H
 complained. She said she'd asked for the premium not to be taken and was unhappy
 with how the episode had been handled. PIB said they were responsible for the
 missed premiums or the collection of the missed premiums.

Ms H remained unhappy and brought her complaint to our service for an independent review. Our investigator looked into it but didn't think it should be upheld. She noted a separate complaint with the insurer who had offered compensation for their errors. She felt PIB had acted in a timely manner and in good faith and were not responsible for the errors.

Ms H responded in full and amongst her points in reply, she said PIB did bear responsibility, she was misinformed and that the missed premium was collected without authorisation and despite her telling PIB she didn't consent to the payment.

As no agreement was reached, the case has been passed 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.

Having done so, I agree with the outcome reached by the investigator. Let me explain why.

Firstly, I understand this will have been distressing for Ms H. She pays a significant premium for her home insurance policy and she will expect it to be administered properly. However, the issue with the premiums not being collected is the responsibility of the insurer. And I understand Ms H has been compensated separately for that. As Ms H has also noted in several pieces of correspondence, she also did not notice the premium not being collected for several months.

PIB noted the error and from the evidence I can see, acted in a timely manner with the insurer to attempt to resolve this. Whilst communication with Ms H could have been quicker (approximately three weeks between noticing the error and informing Ms H) it was the responsibility of the insurer as it was their error and I can see from the file that PIB were acting quickly in trying to help resolve matters during this time.

PIB put Ms H on notice that the missed premium was to be collected within 14 days. Again, this is the responsibility of the insurer and PIB were just relaying this message. They also made her aware that the insurer would be honouring the contract and any claims from this period, as long as the premium was paid.

I do think PIB could have better handled the communications at the start of November 2024. Ms H had requested a payment plan be put in place and then made clear that she didn't consent to the payment being taken. However, PIB have evidenced that the payment at that point had already been initiated by the insurer (it was taken the next day). They were also not responsible for any payment plan and Ms H could have taken this up with the insurer. I note that Ms H also completed a clawback with her bank for the amount that was taken.

In summary, Ms H's main complaint is in relation to the missed premiums, and the collection of this. This is not the responsibility of PIB. After spotting the error I believe they acted reasonably in making Ms H aware of the next steps, that payment would be taken and that no plan was offered. Whilst they could have dealt with her withdrawal of consent quicker, the payment was taken by the insurer and I don't believe they would have been able to stop it at that point. Ms H would have needed to do it directly. I note the impact was reduced as Ms H was able to clawback the payment.

My final decision

I do not uphold this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Ms H to accept or reject my decision before 29 September 2025.

Yoni Smith Ombudsman