

## **The complaint**

Mrs H complained about esure Insurance Limited declining a claim on her buildings insurance policy. Mrs H was also unhappy about how the claim was handled.

## **What happened**

Mrs H took out a buildings insurance policy with esure in late-April 2025. Just over two weeks later she raised a claim due to drainage issues. esure eventually declined the claim in mid-June 2025. The claim was declined due to the damage being pre-policy inception and there being elements of poor installation. Mrs H was unhappy and raised a complaint. She was also unhappy with how long it took esure to decline the claim, especially as she was a vulnerable customer. esure accepted they could have done better and offered Mrs H £250 compensation for the trouble and upset caused. Mrs H was still unhappy so brought the complaint to this service.

Our investigator upheld the complaint. Whilst they didn't think the claim had been declined unfairly, they didn't think the compensation was enough. They increased the compensation to a total of £400. esure accepted the outcome but Mrs H appealed. She maintained the claim had been unfairly declined and still didn't think the compensation was enough. As no agreement could be reached, the complaint has been passed to me to make a final decision.

## **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.

When considering complaints such as this, I need to consider the relevant law, rules and industry guidelines. The relevant rules, set up by the Financial Conduct Authority, say that an insurer must deal with a claim promptly and fairly, and not unreasonably decline it. So, I've thought about whether esure acted in line with these requirements when it declined Mrs H's claim.

Having done so, and whilst I appreciate it'll come as a disappointment to Mrs H, I've reached the same outcome as our investigator.

At the outset I acknowledge that I've summarised her complaint in far less detail than Mrs H has, and in my own words. I'm not going to respond to every single point made. No discourtesy is intended by this. Instead, I've focussed on what I think are the key issues here. The rules that govern the Financial Ombudsman Service allow me to do this as it's an informal dispute resolution service. If there's something I've not mentioned, it isn't because I've overlooked it. I'm satisfied I don't need to comment on every individual point to be able to reach an outcome in line with my statutory remit.

In response to our investigator's outcome, Mrs H raised the following points which I've summarised:

- The damage wasn't reported straight after moving into the property, it took around

three weeks.

- The smell and staining only started after they started using facilities.
- Staining wasn't present on the wall when she moved in.
- The property was empty for over six months prior to Mrs H's occupation and had recently been decorated.
- There is no date or time stamped evidence from before she moved in.
- There is an over reliance on esure's contractor's report and it contains factual inaccuracy.
- Mrs H had no knowledge of the issue before moving in
- esure failed to make reasonable adjustments for Mrs H

I've addressed the above comments under the two main complaint issues below

### **Claim decline**

Under the policy, Mrs H is only covered for events which occur during the policy period. Mrs H raised the claim shortly after moving into the property and the policy starting. esure's contractor has stated the following:

*"Run A has a little fall and is slow to run. There is also structural damage to this run. The damage is historic and occurred prior to you taking out the policy."*

As a service, we have to rely on the expert opinion we're provided by both parties. I've been provided evidence the damage is historic but nothing to counter that it wasn't. I appreciate the comments Mrs H has made above, however, based on what I've seen, I don't think it's unreasonable for esure to have declined the claim based on the damage pre-existing the policy.

Mrs H has said she didn't report the issue immediately. I don't think this means the damage doesn't pre-exist taking out the policy. During a live chat with esure two days after raising the claim, it was noted that Mrs H noticed the issue shortly after moving in. Mrs H has advised that the property was empty for at least six months prior to her moving in and had been recently redecorated. With the system not being used, it may have masked the issue. Likewise, any staining could have been covered over if the property had been redecorated as Mrs H has said.

It wouldn't be possible for esure to have any date stamped evidence of the issue occurring prior to the policy inception. esure have relied on the professional opinion of their contractor about the damage. esure asked Mrs H if she'd had a survey completed prior to purchasing the property, this was to help them establish if the issue wasn't present before she purchased the policy. Unfortunately, Mrs H chose not to have a survey done and so wasn't something that could be considered.

Mrs H has said she had no knowledge of the damage prior to moving into the property. Based on what I've seen, I don't think anyone has said she was aware. Whilst I empathise with Mrs H's situation, even if you're not aware, the event still needs to occur during the period of insurance for a valid claim.

Overall, based on what I've seen, and for the reasons above, I don't think esure has done anything wrong in declining the claim.

### **Service issues**

esure has accepted the service they provided could have been better.

Mrs H has said esure failed to make reasonable adjustments due to her being a vulnerable customer.

I've reviewed the complaint information in detail and have asked Mrs H for clarity and she's confirmed that the only reasonable adjustment she asked for was wanting it resolved as soon as possible which I can understand. However, Mrs H has also said that she thinks there was an onus on esure to proactively consider and offer further adjustments themselves.

I can see that when Mrs H contacted esure, they provided her with clear updates on what was happening. Whilst there were occasions where she didn't always get through to the correct person first time, this often happens in an insurance claim environment.

It took esure just under six weeks from the claim being raised to declining the claim. There was an initial site survey two days after the claim was raised. There were further surveys two and three weeks later. On the whole and had the claim been accepted, I don't think esure could have done much more. However, it has been accepted that esure should have noticed the claim was excluded under pre-existing damage sooner. This caused Mrs H considerable distress, upset and worry which has taken a lot of extra effort to sort out over several weeks.

Having considered the service provided in the round, the impact on Mrs H, and based on our website guidelines, I think the compensation award of £400 by our investigator is fair and reasonable in the circumstances.

I'm very sorry that my decision doesn't bring Mrs H more welcome news at what I can see is a difficult time for her. But in all the circumstances I find that the compensation awarded by the investigator is fair and reasonable.

### **Putting things right**

To put things right, esure should pay Ms H a total of £400 for the trouble and upset caused.

### **My final decision**

For the reasons I've explained above, I uphold this complaint and direct esure Insurance Limited to put things right by doing as I've said above, if they haven't already done so.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mrs H to accept or reject my decision before 9 December 2025.

Anthony Mullins  
**Ombudsman**