

The complaint

Mr A complains about how Haven Insurance Company Limited handled a claim on his motor insurance.

What happened

Mr A had car insurance with Haven. In November 2024 he was involved in a minor road accident. He reported this to Haven and, following an assessment by its claims handler, agreed to repair the car himself. This was because the cost of repairs was unlikely to be more than his policy excess.

Mr A contacted several different repairers who provided quotes broadly in line with the policy excess. He booked a repair with one of them, however the repairer advised him there was more serious damage than first thought. Mr A notified Haven about this in December 2024 and asked it to reimburse any costs higher than his excess. He also asked it to keep him informed of any third-party claim. Haven told him it would open a claim and he'd have to pay the policy excess.

In January 2025, Haven told Mr A it had settled the third-party claim. In February, he sent Haven two invoices from his repairer: one for £2,673.32, the other for £1,100. However, there were delays responding to his emails throughout January, February, and March.

In March 2025, Haven told Mr A it initially didn't realise he was claiming under his policy. It told him it had accepted liability for the accident, settled the third-party claim, and recorded a fault claim against him. It apologised for its poor communication and any inconvenience caused. It noted the repair invoices Mr A had sent, but said it needed more information – for example, evidence of parts purchase receipts from the repairer – before it would authorise payment. It said the second invoice was for repairs that didn't appear to be damage related, and again asked for further information from the repairer.

Mr A is unhappy with Haven. He's unhappy with the claims process. He'd like it to either reimburse him for the cost of repairs or refund his insurance premiums. He complained to this service.

Our investigator recommended that the complaint should be upheld in part. She found no evidence that Haven had agreed to settle the claim. Instead, she found that it was trying to validate the repair costs. She thought its approach was reasonable. However, she thought its service had been poor and recommended that it pay Mr A £150 to reflect this.

Mr A didn't accept this, so the complaint was passed to me.

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.

I think our investigator has explained the situation well.

- Mr A arranged for his own repairs. However, when this happens an insurer will typically review the repairer's estimate before authorising payment.
- The circumstances here were slightly unusual because initially Mr A was happy to pay for the repairs himself. Both Mr A and Haven believed this would cost about the same as his policy excess and the quotes he got seemed to confirm this.
- Mr A doesn't think it's fair for Haven to ask him for so much information, especially when he's reliant on the repairer to provide this. However, I think Haven's requests for repair receipts, invoices, and proof of payment so that it can validate the claim is reasonable. Its liability is limited to the damage caused in the November accident, so I think it should be allowed to check that it's only covering these costs. I think that's important in this case because the repairs aren't being done by one of Haven's approved repairers.
- I note Haven's argument that Mr A's "*garage should be able to provide this without issue as they need to keep receipts for parts purchased for auditing.*" However, I don't think invoice 1 looks unreasonable. The repairs listed (front bumper, grill, sensors) seem broadly in line with Mr A's report of the accident. The breakdown of costs looks to be in line with what I might expect for this type of accident.
- If Mr A is unable to provide more information – and bearing in mind the circumstances of the claim and Haven's delays in responding to Mr A's requests for support (see below) – I think Haven might consider taking a pragmatic approach to this.
- I think Haven's communication during the claim was poor. As Mr A said, at times his emails went unanswered for up to two weeks. I think it's likely this has prolonged the claim. Having said that, I think Mr A might reasonably have called Haven rather than rely solely on email, particularly when he was getting no response.
- I think it was also poor of Haven not to tell Mr A that it had settled the third-party claim. I agree with our investigator that this didn't affect its decision on the repairs but Haven should have told him about the fault claim recorded against him.
- Haven recorded the claim as a fault against Mr A. That's because a claim is considered 'fault' when the policyholder's insurer doesn't recover its full costs from a third party. Haven accepted liability for the damage to the third party's vehicle, so it won't recover its losses. Given Mr A's description of the accident, I think Haven's decision to accept liability was reasonable.
- For the avoidance of doubt, I think Haven's position that Mr A can't cancel the policy and get a refund for the remaining policy term because of the open claim was in line with the policy terms and was fair. This is because Mr A has effectively 'used' his policy for the year so he must pay the full premium.
- Finally, it's clear from reviewing Haven's records, correspondence between the parties, and Mr A's evidence to us that this caused him some distress and inconvenience. I think Haven should compensate him for this.

Overall, I agree with our investigator that it's reasonable for Haven to ask Mr A for information to help it validate the claim. Given the circumstances here, I think its requests have been reasonable and Mr A should try to provide Haven with the information it wants. I think Haven should take a fair and pragmatic view on the evidence Mr A is able to get from his repairer.

Putting things right

I think Haven's communication has been poor throughout much of the claim. I accept that some of this took place over the Christmas period, and I acknowledge that Mr A hasn't called Haven to try to progress the claim. However, I think it should compensate Mr A for this.

Having considered the level of award given by this service in similar circumstances, I think Haven should pay Mr A £200 to reflect the distress and inconvenience it caused Mr A by its handling of his claim.

My final decision

My final decision is that I uphold the complaint in part and order Haven Insurance Company Limited to pay Mr A £200.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr A to accept or reject my decision before 28 October 2025.

Simon Begley
Ombudsman