

The complaint

Mr J complains about Advantage insurance Company's service following a claim he made on his motor insurance policy. Amongst other things, he's complained that it unfairly cancelled his policy, deducted a sum from his brother's, Mr H's, bank card without permission; its salvage agents threatened to crush his car and Advantage had undervalued it

In bringing this complaint Mr J's been supported by his mum, Mrs J, who is a named driver on the policy. But for simplicity I will refer to Mrs J's comments and actions as being Mr J's.

The policy is branded in the name of the insurance intermediary that administers it. But, as Advantage is the policy underwriter, it is responsible for decisions on claims and complaints about those. So I will only refer to it within this decision even though, generally, it was the intermediary that took the actions Mr J is complaining about.

What happened

Mr J insured his car with Advantage. His brother, Mr H, paid an initial deposit and the direct debit instalments towards the premium.

Mr J was in an accident where his car struck a road barrier. No other cars were involved. He claimed on his policy. Advantage deemed Mr J's car a total loss. It initially valued the car at £1,139. But it reduced that amount by £481 because of what it described as pre-existing damage. It said that after deducting Mr J's policy excess of £640 it only valued the potential claim settlement for his at around £17. Mr J wasn't happy with that valuation and asked Advantage to look at it again.

Advantage spoke with Mr J on more than one occasion. It also asked him to produce some information. It sent him a chaser for that information and warned him if he didn't supply it the policy would be cancelled. As it didn't receive that information it cancelled the policy. Having done so it then deducted the remaining premium owing from Mr H's account, a sum in excess of £2,000.

Mr J complained about Advantage's actions. It replied in July 2025. It acknowledged that it had given some incorrect information about a payment refund and paid him £100 compensation. But it didn't otherwise uphold his complaint.

Mr J brought his complaint to the Financial Ombudsman Service. One of our Investigators looked into it. He didn't think Advantage needed to take any further action. Mr J didn't agree so the complaint's 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.

In bringing this complaint Mr J made a number of points. I've considered everything he told us and everything else on file. But in this decision I do not intend to refer to or make a finding on each and every point raised. Instead I will focus on what I see as being the key issues at the heart of Mr J's complaint that remain outstanding following our Investigator's assessment of it.

Also, since Mr J brought his complaint to this Service he's continued to raise concerns about Advantage's actions. For example it appears Advantage appointed Investigators to speak with Mr J concerning another claim, brought by a third party, which happened the day before the accident that gave rise to the claim mentioned within this decision. I understand those Investigators called at Mr J's door and Mr J thinks that Advantage acted in a bullying manner and harassed him and his family while trying to speak to him. However, in line with our usual process, I have confined my consideration of Mr J's complaint to the issues he complained to Advantage about in May and June 2025, and which Advantage had the opportunity to respond to at that point. So I don't intend to make any findings on any issues regarding the third party's claim, or the appointment or conduct of Investigators regarding that claim, within this decision.

I'm also aware that Mr J and Mr H are concerned that Mr H's bank allowed Advantage to take a sum from his account. However, I will not make any findings about the conduct of Mr H's bank here. If Mr H wishes to complain about that, in the first instance – unless he has already done so – he would need to complain directly to the bank.

I'll consider first the issue of Advantage cancelling Mr J's policy. While looking into Mr J's claim I can see it had phone conversations with him and Mrs J. And it asked him for some further information in order to validate his policy details. Those included, amongst other things, copies of the front and back of his and Mrs J's drivers licences and his car's V5C. Mr J objected to the request for further information as he said it had nothing to do with his claim.

I'm satisfied that there was nothing untoward about Advantage's request. A request of this nature is extremely common following a claim. And it's certainly not unusual for insurers like Advantage to want to validate a policyholder's details once a claim has been made or to ask for other information that can verify the details of the policy or a claim.

Advantage sent a request for information on 22 May 2025 and Mr J objected to that request the next day. Advantage then wrote to him again on 30 May 2025. It told him in that letter that he would need to provide the outstanding information by 6 June 2025 or it would cancel his policy. Mr J didn't submit the required information. As a result, on 7 June 2025, Advantage cancelled his policy. I understand that Mr J doesn't think this is fair. But I'm satisfied Advantage gave him adequate warning to let him know that was what it was going to do. And as he didn't send in the requested information I think its actions were reasonable.

Mr J's policy, like all motor policies I'm aware of, requires the policyholder to provide information an insurer asks for following a claim. So, again, I'm satisfied Advantage's request wasn't unusual. And Mr J's policy specifically says that if he doesn't send Advantage information it reasonably asked for then it will cancel his policy. That's what happened here. So in the circumstances I think Advantage cancelled the policy fairly.

I'm aware that Mr J thought the wording of Advantage's information requests was threatening. But an insurer cancelling a policy is a significant event. So I think it was important that Advantage was clear with Mr J what could happen if he didn't comply with its requests for information. That was not a 'threat' it was setting out the next intended step. So, I don't think Advantage acted unfairly here. Similarly I'm aware that Mr J believes Advantage harassed him. But, as I've said above, it's usual for insurers like Advantage, while validating a claim, to want to seek answers to questions and ask their policyholders to provide evidence in support of those claims. I'm aware that some policyholders might find such questions intrusive. But I've seen no evidence of bullying or harassment here beyond Mr J's comments.

Mr J remains unhappy that, after it cancelled his policy, Advantage deducted the remaining premium owing from Mr H's bank card. Mr J believes that Mr H did not give Advantage permission to retain his card details. However, I've listened to the call when Mr J took out the

policy with Advantage. During that call he put Mr H on the line to complete the payment aspects of the policy. After providing his card details Advantage told Mr H:

“Please note that your account will be used for future payments, including your renewal premium fees or any missed payments. You can cancel this continuous payment authority at any time. Is this OK?”

Mr H replied that it was OK.

Later in the call Advantage told Mr J that, unless it told him otherwise his policy would automatically renew. And I haven't heard anywhere else in that call where Mr H, or Mr J, told Advantage that it shouldn't retain Mr H's card details. Further when Advantage sent Mr J his policy documents those included a paragraph under the heading of *“You've agreed to continuous payment authority”* confirming it would use the details held to collect any future payments. So I'm satisfied Mr H had given Advantage the authority to collect any future payments from his account. And I note that Advantage sent Mr J a message to say that it would be making the deduction of the outstanding premium before doing so. In those circumstances I don't think it acted unfairly.

I'm also aware there are other aspects of Advantage's conduct in relation to which Mr J thinks its acted unreasonably. For example he said that its salvage agents had threatened to crush his car. But I've seen no evidence, beyond Mr J's allegations, of that.

Similarly I'm aware that Mr J thought Advantage had undervalued his car, But given the issues that are central to this complaint have now moved on specifically after the cancellation of the policy, I think that's now something of a moot point. That's because, even if I thought there were shortcomings in how Advantage arrived at its valuation, that would not change the outcome for Mr J. That's because Advantage cancelled his policy without validating his claim. That means it has not settled it. As such any argument over the car's valuation seemingly falls to the wayside. And even if I thought Advantage should increase that valuation now, it is not going to pay an increased sum to Mr J now unless it first successfully validates the claim.

In summary I'm aware that Mr J is unhappy with the manner in which Advantage pressed him for information and evidence. But, as I said above, I'm satisfied there was nothing untoward about that. It's usual for insurers to want to validate a policy details and to make sure that a claim happened as the policyholder described it. And insurers often do so by speaking to policyholders, and that process may include asking probing or challenging questions, particularly if the insurer thinks there are any anomalies with the claim and accounts given.

Insurers will also commonly ask policyholders for information and evidence to validate the policy and to ensure that a claim is genuine. And by doing that reasonably insurers can be satisfied that they are only paying claims that they should be. I think that's what happened in this case. But as Mr J didn't cooperate with Advantage's requests for information, in line with his policy's terms and conditions, it cancelled his policy. I think it did so fairly and reasonably.

My final decision

For the reasons set out above I do not uphold this complaint.

Under the rules of the Financial Ombudsman Service, I'm required to ask Mr J to accept or reject my decision before 18 February 2026.

Joe Scott
Ombudsman